

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000125926

**Entity Name:** TAMARA BURKHEAD D.C., LLC

**Current Principal Place of Business:**

1102 W. JEFFERSON ST.  
QUINCY, FL 32351

**Current Mailing Address:**

1102 W. JEFFERSON ST.  
QUINCY, FL 32351 US

**FEI Number:** 81-3188080

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RUDOLPH, JOHN A  
207 WEST PARK AVE.  
SUITE B  
TALLAHASSEE, FL 32301 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name BURKHEAD, TAMARA L DR.  
Address 173 BEAVER CREEK RD  
City-State-Zip: HAVANA FL 32333

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** TAMARA L BURKHEAD

**MANAGER**

**04/16/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date