

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000178841

Entity Name: LEFFLER VETERINARY OFFICE, LLC

Current Principal Place of Business:

1095 NORTH U.S. HIGHWAY 1
SUITE 6
ORMOND BEACH, FL 32174

Current Mailing Address:

1095 NORTH U.S. HIGHWAY 1
SUITE 6
ORMOND BEACH, FL 32174 US

FEI Number: 81-3953300

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HERITAGE LAW, LLC
140 SOUTH BEACH STREET
SUITE 310
DAYTONA BEACH, FL 32114 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: CARLEEN A NICASTRO

01/10/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name LEFFLER, CHARLES W DVM
Address 1095 NORTH U.S. HIGHWAY 1, STE 6
City-State-Zip: ORMOND BEACH FL 32174

Title MGR
Name LEFFLER, LAURA F
Address 1095 NORTH U.S. HIGHWAY 1, STE 6
City-State-Zip: ORMOND BEACH FL 32174

Title MANAGER
Name NICASTRO, CARLEEN
Address 1095 NORTH U.S. HIGHWAY 1
SUITE 6
City-State-Zip: ORMOND BEACH FL 32174

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: CARLEEN NICASTRO

MANAGER

01/10/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date