

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000187367

Entity Name: YACHT CLINIC, LLC

Current Principal Place of Business:

641 NE LAKEVIEW TERRACE
BOCA RATON, FL 33431

Current Mailing Address:

641 NE LAKEVIEW TERRACE
BOCA RATON, FL 33431 US

FEI Number: 81-5083620

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALONSO, JOSHUA A
641 NE LAKEVIEW TERRACE
BOCA RATON, FL 33431 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 MANAGER
Name ALONSO, JOSHUA A
Address 641 NE LAKEVIEW TERRACE
City-State-Zip: BOCA RATON FL 33431

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: JOSHUA A ALONSO

OWNER

03/14/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date