## **2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

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: JOSHUA ALONSO 09/28/2021

Electronic Signature of Registered Agent

Date

FILED Sep 28, 2021

**Secretary of State** 

4849413284CR

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 ALONSO

Electronic Signature of Signing Authorized Person(s) Detail

09/28/2021

Date