## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000214807

Entity Name: U2 HEALTH, LLC

**Current Principal Place of Business:** 

560 VILLAGE BOULEVARD SUITE 300

WEST PALM BEACH, FL 33409

## **Current Mailing Address:**

560 VILLAGE BOULEVARD SUITE 300 WEST PALM BEACH, FL 33409 US

FEI Number: 82-0706868 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CLEVELAND IVY LLC 560 VILLAGE BOULEVARD SUITE 300 WEST PALM BEACH, FL 33409 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: CLIVE HENRY 04/13/2019

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

**PRESIDENT** Title Title

HENRY, CLIVE Name Name MARTIN, MOYA

560 VILLAGE BOULEVARD 560 VILLAGE BOULEVARD Address Address

SUITE 300 SUITE 300

City-State-Zip: WEST PALM BEACH FL 33409 City-State-Zip: WEST PALM BEACH FL 33409

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.

**FILED** Apr 13, 2019

**Secretary of State** 

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