## 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.

MGR

### SIGNATURE: AISHA CUPID

Electronic Signature of Signing Authorized Person(s) Detail

# 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L17000053255

Entity Name: AISHA CUPID, MD PLLC

#### **Current Principal Place of Business:**

3370 NE 190TH STREET 1102 AVENTURA, FL 33180

#### **Current Mailing Address:**

3370 NE 190TH STREET 1102 AVENTURA, FL 33180

### FEI Number: 82-1165501

### Name and Address of Current Registered Agent:

CUPID, AISHA 3370 NE 190 STREET 1102 AVENTURA, FL 33180 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

#### Authorized Person(s) Detail :

Title	MGR	Title	AMBR
Name	CUPID, AISHA	Name	CUPID, AISHA
Address	3370 NE 190TH STREET APT 1102	Address	3370 NE 190 STREET APT 1102
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180

FILED Feb 28, 2019 Secretary of State 0281049018CC

Certificate of Status Desired: No

02/28/2019

Date

Date