#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000147520

Entity Name: BAY AREA SURGICAL ASSISTING LLC

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

4122 MADISON ST. #262 ELFERS, FL 34680

# **Current Mailing Address:**

4122 MADISON ST. #262 ELFERS, FL 34680 US

### FEI Number: 82-2103624

### Name and Address of Current Registered Agent:

JOHNS, LEONARD P 11011 AVANA WAY 107 TRINITY, FL 34655 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 :

TitleMGRNameJOHNS, LEONARD PAddress11011 AVANA WAY APT 107City-State-Zip:TRINITY FL 34655

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.

PRESIDENT

## SIGNATURE: LEONARD JOHNS

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 12, 2020 Secretary of State 9735430922CC

Certificate of Status Desired: No

Date

03/12/2020 Date