#### **2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L17000256668

Entity Name: ADB MEDICAL SERVICES OF NORTH FLORIDA LLC

FILED
Jul 13, 2020
Secretary of State
4574634002CR

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

1215 LEE AVENUE TALLAHASSEE, FL 32303

# **Current Mailing Address:**

1215 LEE AVENUE

TALLAHASSEE. FL 32303 US

FEI Number: 82-3282511 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

BAILEY, AISHA D 1215 LEE AVENUE TALLAHASSEE, FL 32303 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: AISHA BAILEY 07/13/2020

Electronic Signature of Registered Agent

Date

# Authorized Person(s) Detail:

Title MGR

Name BAILEY, AISHA

Address 1571 GARDEN PARK LANE
City-State-Zip: TALLAHASSEE FL 32308

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: AISHA D BAILEY

OWNER/MANAGING PARTNER

07/13/2020