

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000070199

Entity Name: ARTHUR PIERRE-LOUIS, MD LLC

Current Principal Place of Business:

10718 180 PLACE S
BOCA RATON, FL 33498

Current Mailing Address:

22 HARBOR ISLE DR W
308
FT PIERCE, FL 34949 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JRS CONSULTING OF BROWARD, LLC
1000 W MCNAB RD
157
POMPANO BEACH, FL 33069 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

_____ Date

Authorized Person(s) Detail :

Title MGR
Name PIERRE-LOUIS, ARTHUR MD
Address 10718 180 PL S
City-State-Zip: BOCA RATON FL 33498

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: PIERRE-LOUIS,ARTHUR,MD

MGR

03/12/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date