

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000108853

Entity Name: JAYM HEALTHCARE VENTURE, LLC

Current Principal Place of Business:

747 PONCE DE LEON BLVD., UNIT 602
CORAL GABLES, FL 33134

Current Mailing Address:

747 PONCE DE LEON BLVD., UNIT 602
CORAL GABLES, FL 33134 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SABATES, CARLOS A M.D.
747 PONCE DE LEON BLVD., UNIT 602
CORAL GABLES, FL 33134 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 NGR
Name SABATES, CARLOS A M.D.
Address 747 PONCE DE LEON BLVD., UNIT 602

City-State-Zip: CORAL GABLES FL 33134

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: SABATES , CARLOS A , M.D.

MANAGER

04/13/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date