

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000153563

Entity Name: FAMILIAR MEDICAL SERVICES LLC

Current Principal Place of Business:

8085 SPYGLASS HILL RD.
VIERA, FL 32940

Current Mailing Address:

8085 SPYGLASS HILL RD.
VIERA, FL 32940 US

FEI Number: 83-1074768

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOMBARD, SHERRI ACCOUNTANT
8085 SPYGLASS HILL RD
VIERA, FL 32940 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: SHERRI LOMBARD

02/22/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name HERNANDEZ PONS, EDGARDO
Address 8085 SPYGLASS HILL RD.
City-State-Zip: VIERA FL 32940

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: EDGARDO HERNANDEZ PONS

PRESIDENT

02/22/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date