

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000159743

Entity Name: DR GUILLERMO MENDOZA - INT MED - LLC

Current Principal Place of Business:

2572 W STATE RD 426 # 3040
OVIEDO, FL 32765

Current Mailing Address:

2572 W STATE RD 426 # 3040
OVIEDO, FL 32765 US

FEI Number: 83-1146286

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MENDOZA FONSECA, GUILLERMO A DR
2572 W STATE RD 426 # 3040
OVIEDO, FL 32765 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 AP
Name MENDOZA FONSECA, GUILLERMO A DR
Address 890 BROADSTONE WAY
APT 109
City-State-Zip: ALTAMONTES SPRING FL 32714

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: MENDOZA FONSECA , GUILLERMO , A , DR

AP

04/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date