

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000160773

**Entity Name:** PAPER STREET MEDICAL, LLC

**Current Principal Place of Business:**

170 NE 33RD ST  
OAKLAND BEACH, FL 33334

**Current Mailing Address:**

1245 NE 3RD AVE. 1  
FORT LAUDERDALE, FL 33304 US

**FEI Number:** 83-1131462

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LINART BUSINESS SERVICES INC  
399 CAMINO GARDENS BLVD  
STE 305  
BOCA RATON, FL 33432 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            AMBR  
Name            WORONECKI, ADAM R  
Address        1245 NE 3RD AVE. 1  
City-State-Zip: FORT LAUDERDALE FL 33304

*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:** ADAM R WORONECKI

MR

02/09/2021

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date