## 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. 01/09/2021

SIGNATURE: WAYNE STRASSMAN

Electronic Signature of Signing Authorized Person(s) Detail

# 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000192257

## Entity Name: MEDICAL BUILDING SERVICES OF BOCA LLC

#### **Current Principal Place of Business:**

5124-A LAKE CATALINA DR BOCA RATON, FL 33496

### **Current Mailing Address:**

5124-A LAKE CATALINA DR BOCA RATON, FL 33496

## FEI Number: NOT APPLICABLE

## Name and Address of Current Registered Agent:

WOLFF-STRASSMAN, CHRISTINE 5124-A LAKE CATALINA DR BOCA RATON, FL 33496 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

## Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	STRASSMAN, WAYNE	Name	WOLFF-STRASSMAN, CHRISTINE
Address	5124-A LAKE CATALINA DR	Address	5124-A LAKE CATALINA DR
City-State-Zip:	BOCA RATON FL 33496	City-State-Zip:	BOCA RATON FL 33496

Certificate of Status Desired: No

FILED Jan 09, 2021 Secretary of State

Date

## 6407711864CC

Date

MANAGING PARTNER