

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000041918

Entity Name: INTEGRA HEALTHCARE EQUIPMENT OF MIAMI, LLC

Current Principal Place of Business:

321 W LAKE ST C
ELMHURST, IL 60126

Current Mailing Address:

321 W LAKE ST C
ELMHURST, IL 60126 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 MGR
Name SCHECHTER, EITAN
Address 312 W LAKE ST C
City-State-Zip: ELMHURST IL 60126

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: EITAN SCHECHTER

MANAGER

03/19/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date