

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000099676

Entity Name: CFKC CAPITAL, LLC

Current Principal Place of Business:

1745 LAKELAND HILLS BLVD.
LAKELAND, FL 33805

Current Mailing Address:

1745 LAKELAND HILLS BLVD.
LAKELAND, FL 33805

FEI Number: 83-4398066

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEDINA LAW GROUP, P.A.
402 S. KENTUCKY AVE., STE. 660
LAKELAND, FL 33801 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 CENTRAL FLORIDA KIDNEY CARE,
P.A.
Address 1745 LAKELAND HILLS BLVD.
City-State-Zip: LAKELAND FL 33805

Title AP
Name COLON, FERNANDO
Address 1745 LAKELAND HILLS BLVD.
City-State-Zip: LAKELAND FL 33805

Title AP
Name MEDINA, DANIEL
Address 402 S KENTUCKY AVE., STE. 660
City-State-Zip: LAKELAND FL 33801

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: FERNANDO J COLON

AP

06/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date