

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000152919

Entity Name: OPHTHALMIC SURGICAL HOLDINGS, LLC

Current Principal Place of Business:

1776 NORTH PINE ISLAND ROAD SUITE 214
PLANTATION, FL 33322

Current Mailing Address:

1776 NORTH PINE ISLAND ROAD SUITE 214
PLANTATION, FL 33322

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUBAL, AARUP
18101 COLLINS AVE PH 306
SUNNY ISLES BEACH, FL 33160 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 OPHTHALMIC OPPORTUNITY FUND, LLC
Address 17121 COLLINS AVE #2403
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title AMBR
Name OPHTHALMIC SURGICAL INVESTMENT GROUP, LLC
Address 17121 COLLINS AVE #2403
City-State-Zip: SUNNY ISLES BEACH FL 33160

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: AARUP KUBAL

OWNER

02/28/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date