

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000251662

Entity Name: VASCULAR ER SOLUTIONS LLC

Current Principal Place of Business:

10935 WHITECAP DRIVE
RIVERVIEW, FL 33579

Current Mailing Address:

10935 WHITECAP DRIVE
RIVERVIEW, FL 33579

FEI Number: 84-4359845

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FINKLEY, ANDREW
10935 WHITECAP DRIVE
RIVERVIEW, FL 33579 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	CEO	Title	CEO
Name	FINKLEY, ANDREW R	Name	SMITH, ANA
Address	10935 WHITECAP DRIVE	Address	14012 11TH TERRACE NE
City-State-Zip:	RIVERVIEW FL 33579	City-State-Zip:	BRADENTON FL 34212

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: ANDREW FINKLEY

CEO

01/20/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date