

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000290472

Entity Name: 20/20 VISION EYE CENTER LLC

Current Principal Place of Business:

7801 POINT MEADOWS DRIVE, UNIT 5208
JACKSONVILLE, FL 32256

Current Mailing Address:

7801 POINT MEADOWS DRIVE UNIT 5208
JACKSONVILLE, FL 32256

FEI Number: 84-3934598

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PHAM, HUY
7801 POINT MEADOWS DRIVE UNIT 5208
JACKSONVILLE, FL 32256 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 PHAM, HUY
Address 7801 POINT MEADOWS DRIVE UNIT
5208
City-State-Zip: JACKSONVILLE FL 32256

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: HUY PHAM

MANAGER

02/11/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date