

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000078806

Entity Name: VALANT MEDICAL, P.L.L.C.

Current Principal Place of Business:

266 NW PEACOCK BLVD, STE 205
PORT ST. LUCIE, FL 34986

Current Mailing Address:

266 NW PEACOCK BLVD, STE 205
PORT ST. LUCIE, FL 34986 US

FEI Number: 45-2850317

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEC CONSULTANTS, INC.
601 21ST STREET, SUITE 300
VERO BEACH, FL 32960 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 MANAGER
Name POTO, MONICA B
Address 266 NW PEACOCK BLVD, STE 205
City-State-Zip: PORT ST. LUCIE FL 34986

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: MONICA B POTO

MANAGER

08/17/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date