# 2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1700006417

Entity Name: LUCIA EYE CARE, LLC

#### Current Principal Place of Business:

4820 NW 1TH TER BOCA RATON, FL 33431

## **Current Mailing Address:**

951 SW 4TH AVE BOCA RATON, FL 33432 US

# FEI Number: 81-2477777

# Name and Address of Current Registered Agent:

BLAKESBERG, JON D 951 SW 4TH AVE BOCA RATON, FL 33432 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

## Authorized Person(s) Detail :

TitleMBRNameEAKINS, MATTHEW TAddress4820 NW 1TH TERCity-State-Zip:BOCA RATON FL 33431

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: EAKINS, MATTHEW T

MBR

04/25/2018 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 25, 2018 Secretary of State CC9378748061

Certificate of Status Desired: No

Date