

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90007 004 ****50.00

DOCUMENT # L01000000441

1. Entity Name

Doctors for Kids, LLC

DO NOT WRITE IN THIS SPACE

80036497

2. Principal Place of Business
3487 Broadway

3. Mailing Address
3487 Broadway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Fort Myers, Florida

City & State
Fort Myers, Florida

4. FEI Number
65-1071200

Applied For
Not Applicable

Zip
33901

Country
USA

Zip
33901

Country
USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Mike Ellis

Street Address (P.O. Box Number is Not Acceptable)

3487 Broadway

City Fort Myers FL Zip Code 33901

8. 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

Mike Ellis, Manager

2-07-02

DATE

FEE IS \$50.00

Make Check Payable to Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Manager
Mike Ellis
3487 Broadway
Fort Myers, Florida 33901

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

Mike Ellis, Manager

207-02 941-939-1441

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/01)