

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000022618

**Entity Name:** J.H. CHO, MD, LLC

**Current Principal Place of Business:**

6381 MACLAURIN DRIVE  
TAMPA, FL 33647

**Current Mailing Address:**

6381 MACLAURIN DRIVE  
TAMPA, FL 33647 US

**FEI Number:** 20-4359764

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DUNSFORD, TINA  
C/O TINA DUNSFORD  
401 E. JACKSON STREET SUITE 2450  
TAMPA, FL 33602 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:** TINA DUNSFORD

04/30/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name CHO, JAI H M.D.  
Address 6381 MACLAURIN DRIVE  
City-State-Zip: TAMPA FL 33647

*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:** JAI H. CHO MD

MANAGING MEMBER

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date