

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000028801

**FILED
Feb 10, 2017
Secretary of State
CC9262067730**

Entity Name: STEEDE MEDICAL LLC

Current Principal Place of Business:

11433 NW 34TH STREET
DORAL, FL 33178

Current Mailing Address:

11433 NW 34TH STREET
DORAL, FL 33178 US

FEI Number: 20-1399388

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

STEEDE, LOUIS
11433 NW 34TH STREET
DORAL, FL 33178 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: LOUIS STEEDE

02/10/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name STEEDE, LOUIS L C
Address 11433 NW 34TH STREET
City-State-Zip: DORAL FL 33178

Title MGRM
Name STEEDE, ELENA D
Address 11433 NW 34TH STREET
City-State-Zip: DORAL FL 33178

Title MGRM
Name STEEDE, ADAM N.C.
Address 11433 NW 34TH STREET
City-State-Zip: DORAL FL 33178

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: LOUIS L C STEEDE

MRGM

02/10/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date