

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000047337

Entity Name: GROVE MEDICAL, LLC

Current Principal Place of Business:

10400 GRIFFIN ROAD
103
COOPER CITY , FL 33328

Current Mailing Address:

10400 GRIFFIN ROAD
103
COOPER CITY , FL 33328 US

FEI Number: 26-0379212

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BENDER, HARRY K
980 NW N RIVER DRIVE
128
MIAMI, FL 33136 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: HARRY BENDER

04/19/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	THOMPSON, BEAU	Name	MACBROOM, CLIFFORD
Address	9020 S.W. 83 STREET	Address	11200 ORANGE DRIVE
City-State-Zip:	MIAMI FL 33173	City-State-Zip:	DAVIE FL 33330

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: CLIFFORD MACBROOM

MGR

04/19/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date