

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000023485

**FILED
Jan 07, 2015
Secretary of State
CC8703242901**

Entity Name: 7421 N. UNIVERSITY MEDICAL OFFICE LLC

Current Principal Place of Business:

7421 N. UNIVERSITY DRIVE
SUITE 306
TAMARAC, FL 33321

Current Mailing Address:

7421 N. UNIVERSITY DRIVE
SUITE 306
TAMARAC, FL 33321

FEI Number: 26-3284869

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILITZOK & LEVY, P.A.
3230 STIRLING ROAD
SUITE 1
HOLLYWOOD, FL 33021 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

Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	ARMENAKIS, GUS	Name	ARMENAKIS, JULIA
Address	7421 N UNIVERSITY DR SUITE 306	Address	7421 N UNIVERSITY DR SUITE 306
City-State-Zip:	TAMARAC FL 33321	City-State-Zip:	TAMARAC FL 33321

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: JULIA ARMENAKIS

MANAGER

01/07/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date