

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000063090

Entity Name: FIONA O. AZUBUIKE, M.D., PLLC

Current Principal Place of Business:

345 OCEAN DRIVE
APT. # 819
MIAMI BEACH, FL 33139

Current Mailing Address:

345 OCEAN DRIVE
APT. # 819
MIAMI BEACH, FL 33139 US

FEI Number: 26-2901866

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

AZUBUIKE, FIONA OMD
345 OCEAN DRIVE
APT. # 819
MIAMI BEACH, FL 33139 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
Name AZUBUIKE, FIONA OMD
Address 345 OCEAN DRIVE
APT. # 845
City-State-Zip: MIAMI BEACH FL 33139

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: FIONA O AZUBUIKE

MGRM

06/21/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date