

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000001778

Entity Name: CRANIOSPINAL CONSULTANTS, LLC

Current Principal Place of Business:

403 S. SAPODILLA AVE
APT. 418
WEST PALM BEACH, FL 33401

Current Mailing Address:

403 S. SAPODILLA AVE
APT. 418
WEST PALM BEACH, FL 33401

FEI Number: 26-3972046

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOURI, JOSHUA MGR
403 S. SAPODILLA AVE
APT. 418
WEST PALM BEACH, FL 33401 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: JOSHUA KOURI

03/05/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name JOSHUA, KOURI
Address 403 S. SAPODILLA AVE. APT 418
City-State-Zip: WEST PALM BEACH FL 33401

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: JOSHUA KOURI

MGR

03/05/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date