

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000027414

Entity Name: OPTIMUM MEDICAL DESIGN, LLC

Current Principal Place of Business:

888 BRICKELL AVENUE
SUITE 305
MIAMI, FL 33131

Current Mailing Address:

888 BRICKELL AVENUE
SUITE 305
MIAMI, FL 33131 US

FEI Number: 81-1416750

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERNANDEZ, DANIEL
250 CATALONIA AVENUE
SUITE 600
CORAL GABLES, FL 33134 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: DANIEL FERNANDEZ

06/30/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	CADET, CARLOS M	Name	RAGGIO, CLAUDIA
Address	888 BRICKELL AVENUE SUITE 305	Address	888 BRICKELL AVENUE SUITE 305
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

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: CADET , CARLOS M

MANAGER

06/30/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date