

**2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000065090

**Entity Name:** A & A MEDICAL HEALTHCARE SERVICES LLC

**Current Principal Place of Business:**

600 NE 27TH ST  
3102  
MIAMI, FL 33137

**Current Mailing Address:**

600 NE 27TH ST  
3102  
MIAMI, FL 33137 US

**FEI Number:** 27-0639940

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MORGANS FINANCIAL SERVICES  
4111 STIRLING ROAD  
SUITE 202W  
FT LAUDERDALE, FL 33314 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:** EARL MORGAN

10/14/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name HERNANDEZ, ANTERO  
Address 9878 SW 161 AVE  
City-State-Zip: MIAMI FL 33196

*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:** ANTERO HERNANDEZ

OWNER

10/14/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date