

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000068498

Entity Name: ARMANDO DE LA CABADA, MD, LLC

Current Principal Place of Business:

401 SE 12TH STREET
SUITE 300
FORT LAUDERDALE, FL 33316

Current Mailing Address:

401 SE 12TH STREET
SUITE 300
FORT LAUDERDALE, FL 33316 US

FEI Number: 26-1923405

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDA HEALTH LAW CENTER
10200 W STATE ROAD 84
SUITE 106
DAVIE, FL 33324 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: JODI LAURENCE

04/30/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name DE LA CABADA, ARMANDO MD
Address 17874 NW 2ND STREET
City-State-Zip: PEMBROKE PINES FL 33029-2806

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: ARMANDO DE LA CABADA

MGR

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date