## 2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000063869

Entity Name: HEALTHNOW FAMILY PRACTICE LLC

**Current Principal Place of Business:** 

2086 GULF TO BAY BLVD CLEARWATER. FL 33765

**Current Mailing Address:** 

2086 GULF TO BAY BLVD CLEARWATER, FL 33765 US

FEI Number: 27-2883219 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NGO, ANTHONY DR. 2086 GULF TO BAY BLVD CLEARWATER, FL 33765 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: ANTHONY NGO 10/18/2016

Electronic Signature of Registered Agent

Date

Date

FILED Oct 18, 2016

**Secretary of State** 

CR9532908873

Authorized Person(s) Detail:

Title MANAGING MEMBER Title MANAGER

Name NGO, ANTHONY Name NGO, KATHLEEN

Address 2086 GULF TO BAY BLVD Address 2086 GULF TO BAY BLVD

City-State-Zip: CLEARWATER FL 33765 City-State-Zip: CLEARWATER FL 33765

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: ANTHONY NGO 10/18/2016