

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000031727

**Entity Name:** JACQUELINE D. GUNN, O.D., P.L.L.C.

**Current Principal Place of Business:**

9705 COLLINS AVENUE  
1502  
BAL HARBOUR , FL 33154

**Current Mailing Address:**

9705 COLLINS AVENUE  
1502  
BAL HARBOUR , FL 33154 US

**FEI Number:** 45-1580924

**Certificate of Status Desired:** No

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

DADE COUNTY CORPORATE AGENTS, INC.  
20295 NE 29 PLACE  
SUITE 200  
AVENTURA, FL 33180 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name GUNN, JACQUELINE D  
Address 9075 COLLINS AVENUE  
1502  
City-State-Zip: BAL HARBOUR FL 33154

*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:** JACQUELINE D. GUNN

MGR

07/05/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date