

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000026334

Entity Name: MIDTOWN CHIROPRACTIC PLLC

Current Principal Place of Business:

3208 LANTANA ROAD
LANTANA, FL 33462

Current Mailing Address:

3208 LANTANA ROAD
LANTANA, FL 33462

FEI Number: 45-4618231

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLON, FRANCISCO MDR
3208 LANTANA ROAD
LANTANA, FL 33462 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 MGRM
Name COLON, FRANCISCO MDR
Address 1550 BRICKELL AVE 203A
City-State-Zip: MIAMI FL 33129

Title MGR
Name COLON, SEBASTIAN
Address 5700 COLLINS AVENUE, APT. 56
City-State-Zip: MIAMI BEACH FL

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: FRANCISCO COLON

MANAGER/ OWNER

01/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date