

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000157007

Entity Name: OBGYN HOSPITALISTS OF THE PALM BEACHES, LLC

Current Principal Place of Business:

770 NORTHPOINT PKWY
STE 102
WEST PALM BEACH, FL 33407

Current Mailing Address:

770 NORTHPOINT PKWY
STE 102
WEST PALM BEACH, FL 33407 US

FEI Number: 46-1588640

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURIGO, JOHN
770 NORTHPOINT PARKWAY
SUITE 102
WEST PALM BEACH, FL 33407 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 MANAGER
Name OBGYN FOUNDER HOLDINGS, INC.
Address 770 NORTHPOINT PKWY
 STE 102
City-State-Zip: WEST PALM BEACH FL 33407

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: JOHN BURIGO

01/02/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date