

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000099535

Entity Name: TWIN SURGICAL LLC

Current Principal Place of Business:

2655 ULMERTON RD
207
CLEARWATER, FL 33762

Current Mailing Address:

2655 ULMERTON RD
207
CLEARWATER, FL 33762

FEI Number: 46-3180828

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, ROBERT W IV
2655 ULMERTON RD
207
CLEARWATER, FL 33762 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 MILLER, ROBERT W IV
Address 2655 ULMERTON RD #207
City-State-Zip: CLEARWATER FL 33762

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: ROBERT MILLER

PRESIDENT

04/18/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date