## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000124953

Entity Name: BLUE STAR ANIMAL HOSPITAL, LLC

Current Principal Place of Business:

2851 CR 210 W SUITE 119

SAINT JOHNS, FL 32259

## **Current Mailing Address:**

2851 CR 210 W SUITE 119 SAINT JOHNS, FL 32259 US

FEI Number: 46-5006015 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KANCHARKUNTLA, SRILATHA 2851 CR 210 W SUITE 119 SAINT JOHNS, FL 32259 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: SRILATHA KANCHARKUNTLA

04/19/2015

FILED Apr 19, 2015

**Secretary of State** 

CC7721467347

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail:

Title MGRM

Name KANCHARKUNTLA, SRILATHA

Address 2851 CR 210 W

SUITE 119

City-State-Zip: SAINT JOHNS FL 32259

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: SRILATHA KANCHARKUNTLA

MGRM

04/19/2015

Date