# 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000142930

Entity Name: FLEX MEDICAL CENTERS, LLC

### **Current Principal Place of Business:**

1501 PRESIDENTIAL WAY SUITE 17 WEST PALM BECAH, FL 33401

# **Current Mailing Address:**

125 S STATE ROAD 7 SUITE 104-274 WELLINGTON, FL 33414 US

# FEI Number: 46-4045913

### Name and Address of Current Registered Agent:

BRUNO, JOHN C DR. 125 S STATE ROAD 7 SUITE 104-274 WELLINGTON, FL 33414 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

### Authorized Person(s) Detail :

Authorized Person(s) Detail.			
Title	MGRM	Title	MGRM
Name	GONZALEZ BRUNO, ELIZABETH L DR.	Name	BRUNO, JOHN C DR.
Address	125 S STATE ROAD 7 SUITE 104-274	Address	125 S STATE ROAD 7 SUITE 104-274
City-State-Zip:	WELLINGTON FL 33414	City-State-Zip:	WELLINGTON FL 33414

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: ELIZABETH GONZALEZ BRUNO

PRESIDENT

06/29/2020

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Jun 29, 2020 Secretary of State 7955848432CC

Certificate of Status Desired: No

igning Authorized Person(s) Detail