## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000149565

Entity Name: ESSENTIAL ICU SOLUTIONS, LLC

**Current Principal Place of Business:** 

1052 WHISPERWOOD WAY SANIBEL, FL 33957

**Current Mailing Address:** 

1052 WHISPERWOOD WAY SANIBEL, FL 33957 US

FEI Number: 46-4892831 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRASSI, FRANK T DR. 1052 WHISPERWOOD WAY SANIBEL, FL 33957 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: FRANK T. GRASSI 03/12/2016

Electronic Signature of Registered Agent

Date

FILED Mar 12, 2016

**Secretary of State** 

CC5318508060

Authorized Person(s) Detail:

Title MGR Title VP

NameSANTUCCI, RAYMONDNameGRASSI, FRANK TRIESTE DR.Address8965 COLLEGE PARKWAYAddress1052 WHISPERWOOD WAY

City-State-Zip: FT. MYERS FL 33919 City-State-Zip: SANIBEL FL 33957

Title VP

Name GRASSI, FRANK TRIESTE DR. Address 1052 WHISPERWOOD WAY

City-State-Zip: SANIBEL FL 33957

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: FRANK GRASSI

Electronic Signature of Signing Authorized Person(s) Detail

**REGISTERED AGENT** 

03/12/2016

Date