## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000045594

Entity Name: YOUR HOUSE DOCTOR LLC

**Current Principal Place of Business:** 

130 PLACID DR FT MYERS, FL 33919

**Current Mailing Address:** 

130 PLACID DR

FT MYERS. FL 33919 US

FEI Number: 46-5140818 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SONN, GREGORY 130 PLACID DR FT MYERS, FL 33919 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

FILED Apr 07, 2019

**Secretary of State** 

2211562369CC

Authorized Person(s) Detail:

Title AR Title

NameSONN, GREGORYNameSONN, ALISAAddress130 PLACID DRAddress130 PLACID DR

City-State-Zip: FT MYERS FL 33919 City-State-Zip: FT MYERS FL 33919

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: GREGORY SONN

CMO

AR

04/07/2019