

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000066678

Entity Name: ATLAS PET CLINIC, LLC

Current Principal Place of Business:

13900 CR 455, STE 105
CLERMONT , FL 34711

Current Mailing Address:

833 CURA COURT
OAKLAND, FL 34787

FEI Number: 46-5472731

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHUACUCO, CHARLEMAGNE E
833 CURA COURT
OAKLAND, FL 34787 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 CHUACUCO, CHARLEMAGNE
Address 833 CURA COURT
City-State-Zip: OAKLAND FL 34787

Title MGR
Name CHUACUCO, GEMINA R
Address 833 CURA COURT
City-State-Zip: OAKLAND FL 34787

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: CHARLEMAGNE CHUACUCO

MANAGER

03/09/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date