

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000106440

Entity Name: SUNLIFE REHABILITATION CENTER, LLC

Current Principal Place of Business:

2720 SW 97 AVE
STE C-107
MIAMI, FL 33165

Current Mailing Address:

2720 SW 97 AVE
STE C-107
MIAMI, FL 33165 US

FEI Number: 47-1423028

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOMEZ DC, DRA SANDRA
2720 SW 97 AVE
SUITE C-107
MIAMI, FL 33165 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: DRA SANDRA GOMEZ DC

01/15/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name GOMEZ DC, DRA SANDRA
Address 2720 SW 97 AVE
SUITE C-107
City-State-Zip: MIAMI FL 33165

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: DRA SANDRA GOMEZ DC

MGRM

01/15/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date