

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000113429

Entity Name: BLUE OCEAN MEDICAL, LLC

Current Principal Place of Business:

2700 WEST CYPRESS CREEK ROAD
SUITE D-134
FORT LAUDERDALE, FL 33309

Current Mailing Address:

2700 WEST CYPRESS CREEK ROAD
SUITE D-134
FORT LAUDERDALE, FL 33309 US

FEI Number: 47-1707083

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRIEDMAN, DAVID A
2700 WEST CYPRESS CREEK ROAD
SUITE D-134
FORT LAUDERDALE, FL 33309 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 FRIEDMAN, DAVID A
Address 2700 WEST CYPRESS CREEK ROAD
SUITE D-134
City-State-Zip: FORT LAUDERDALE FL 33309

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: DAVID A FRIEDMAN

MANAGING DIRECTOR

04/13/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date