

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000174831

Entity Name: DELRAY LASER LLC

Current Principal Place of Business:

495 NE 4TH ST #3
DELRAY BEACH, FL 33483

Current Mailing Address:

495 NE 4TH ST #3
DELRAY BEACH, FL 33483 US

FEI Number: 47-2270774

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEVINE, DAVID J
495 NE 4TH ST #3
DELRAY BEACH, FL 33483 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 AMBR
Name LEVINE, DAVID J
Address 495 NE 4TH ST #3
City-State-Zip: DELRAY BEACH FL 33483

Title AMBR
Name MAYERS, CYNTHIA R
Address 495 NE 4TH ST #3
City-State-Zip: DELRAY BEACH FL 33483

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 LEVINE

BUSINESS DIRECTOR

03/27/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date