## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000020481

Entity Name: SURGICAL EDUCATION, LLC

**Current Principal Place of Business:** 

19333 COLLINS AVE APT 2302

SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:** 

19333 COLLINS AVE APT 2302

SUNNY ISLES BEACH, FL 33160 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SERBER & ASSOCIATES, P.A. 2875 NE 191 ST STE 801 AVENTURA, FL 33180 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 Feb 08, 2018

**Secretary of State** 

CC4708678857

## Authorized Person(s) Detail:

Title MGR

Name RANCATI, ALBERTO Address 19333 COLLINS AVE

**APT 2302** 

SIGNATURE: RANCATI, ALBERTO

City-State-Zip: SUNNY ISLES BEACH FL 33160

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

**MGR** 

Date

02/08/2018