

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000068726

Entity Name: SOUTH FLORIDA DIALYSIS CONSULTING, LLC

Current Principal Place of Business:

4627 PONCE DE LEON BOULEVARD
CORAL GABLES, FL 33146

Current Mailing Address:

4627 PONCE DE LEON BOULEVARD
CORAL GABLES, FL 33146

FEI Number: 47-3791048

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACKSON, JOSEPH
4627 PONCE DE LEON BOULEVARD
CORAL GABLES, FL 33146 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: JOSEPH JACKSON

01/09/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name WEINER, NEIL
Address 4627 PONCE DE LEON BOULEVARD
City-State-Zip: CORAL GABLES FL 33146

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: NEIL WEINER

MGR

01/09/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date