## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000153508

Entity Name: SPEAR SURGICAL, LLC

**Current Principal Place of Business:** 

8133 BAHIA BLANCA STREET JACKSONVILLE, FL 32256

**Current Mailing Address:** 

8133 BAHIA BLANCA STREET JACKSONVILLE, FL 32256 US

FEI Number: 81-3568178 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANTHONY, KELLY PATRICK 8133 BAHIA BLANCA STREET JACKSONVILLE, FL 32256 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: ANTHONY KELLY 02/11/2019

Electronic Signature of Registered Agent

Date

FILED Feb 11, 2019

**Secretary of State** 

1378733692CC

Authorized Person(s) Detail:

Title MGR

Name KELLY, ANTHONY P

Address 8133 BAHIA BLANCA STREET
City-State-Zip: JACKSONVILLE FL 32256

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: ANTHONY PATRICK KELLY

**MANAGER** 

02/11/2019