

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000178841

**FILED
Jan 30, 2017
Secretary of State
CC7102691406**

Entity Name: LEFFLER VETERINARY OFFICE, LLC

Current Principal Place of Business:

1095 NORTH U.S. HIGHWAY 1
SUITE 6
ORMOND BEACH, FL 32174

Current Mailing Address:

1095 NORTH U.S. HIGHWAY 1
SUITE 6
ORMOND BEACH, FL 32174 US

FEI Number: 81-3953300

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEFFLER & YAMANI, LLP
7563 PHILIPS HIGHWAY
BUILDING 300, SUITE 303
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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name LEFFLER, CHARLES W DVM
Address 1095 NORTH U.S. HIGHWAY 1, STE 6
City-State-Zip: ORMOND BEACH FL 32174

Title MGR
Name LEFFLER, LAURA F
Address 1095 NORTH U.S. HIGHWAY 1, STE 6
City-State-Zip: ORMOND BEACH FL 32174

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: CHARLES W LEFFLER DVM

MANAGER

01/30/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date