

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000214390

Entity Name: SOUTH FLORIDA INTEGRATIVE HEALTH , PLLC

Current Principal Place of Business:

1330 CORAL WAY,
SUITE 306
MIAMI, FL 33145

Current Mailing Address:

1330 CORAL WAY,
SUITE 306
MIAMI, FL 33145 US

FEI Number: 81-4533405

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE LAW OFFICES OF NICK SPAULDING, PLLC
2202 N. WEST SHORE BLVD., STE 200
TAMPA, FL 33607 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 TRASTER, DAVID
Address 1330 CORAL WAY,
 SUITE 306
City-State-Zip: MIAMI FL 33145

Title AMBR
Name BRENNER, KELSEY
Address 1330 CORAL WAY,
 SUITE 306
City-State-Zip: MIAMI FL 33145

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 TRASTER

CEO

04/06/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date