

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000098405

Entity Name: LINDA MARTINEZ M.D. LLC

Current Principal Place of Business:

3901 NW 79TH AVENUE
SUITE 120
DORAL, FL 33166

Current Mailing Address:

3901 NW 79TH AVENUE
SUITE 120
DORAL, FL 33166 US

FEI Number: 82-1398596

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, LINDA M
3901 NW 79TH AVENUE
SUITE 120
DORAL, FL 33166 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 MARTINEZ, LINDA M
Address 3901 NW 79TH AVENUE SUITE 120
City-State-Zip: DORAL FL 33166

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: LINDA MARTINEZ

MD

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date