

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000149598

Entity Name: EPICC VASCULAR TAMPA BAY FLORIDA PLLC

Current Principal Place of Business:

4065 TRIGGERFISH DR.
HERNANDO BEACH, FL 34607

Current Mailing Address:

4065 TRIGGERFISH DR.
HERNANDO BEACH, FL 34607 US

FEI Number: 82-2323367

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEGALCORP SOLUTIONS, LLC
3440 W HOLLYWOOD BLVD. SUITE 415
HOLLYWOOD, FL 33021 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 WHETSTONE, TINA M
Address 4065 TRIGGERFISH DR.
City-State-Zip: HERNANDO BEACH FL 34607

Title AMBR
Name WHETSTONE, ALLEN C IV
Address 4065 TRIGGERFISH DR.
City-State-Zip: HERNANDO BEACH FL 34607

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: TINA WHETSTONE

PRESIDENT/CEO

05/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date