

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000161437

Entity Name: MINIMALLY INVASIVE SPINE CENTER OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

3659 S. MIAMI AVE., #4002
MIAMI, FL 33133

Current Mailing Address:

3659 S. MIAMI AVE., #4002
MIAMI, FL 33133 US

FEI Number: 82-2320048

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREENSPOON MARDER, P.A.
200 E BROWARD BLVD., STE 1800
FT LAUDERDALE, FL 33301 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 GOTTLIEB, JONATHAN
Address 6141 SUNSET DR, STE 102
City-State-Zip: MIAMI FL 33143

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: JONATHAN GOTTLIEB

MGR

01/23/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date