

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000168534

Entity Name: DR. LAURA MOBILE ANIMAL HOSPITAL PLLC

Current Principal Place of Business:

3803 101ST AVENUE EAST
PARRISH, FL 34219

Current Mailing Address:

3803 101ST AVENUE EAST
PARRISH, FL 34219 US

FEI Number: 82-2437987

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ESLINGER, HELEN
309 136TH COURT E.
BRADENTON, FL 34212 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 ESLINGER, LAURA
Address 3803 101ST AVENUE EAST
City-State-Zip: PARRISH FL 34219

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: ESLINGER, LAURA

AMBR

02/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date