

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000204029

Entity Name: BOND URGENT CARE, LLC

Current Principal Place of Business:

325 FIRST ST
WINTER HAVEN, FL 33880

Current Mailing Address:

325 FIRST ST
WINTER HAVEN, FL 33880 US

FEI Number: 82-3110303

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AEBEL, ERIN SMITH ESQ
101 EAST KENNEDY BLVD STE 2800
TAMPA, FL 33602 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 BOND & STEELE CLINIC, P.A.
Address 500 E CENTRAL AVE
City-State-Zip: WINTER HAVEN FL 33880

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: ERIN SMITH AEBEL, ESQ

REGISTERED AGENT

03/20/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date