

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000237718

Entity Name: WOMEN'S CARE FLORIDA SURGICAL CENTER, LLC

Current Principal Place of Business:

5002 W LEMON STREET
TAMPA, FL 33609

Current Mailing Address:

5002 W LEMON STREET
TAMPA, FL 33609 US

FEI Number: 82-2184540

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR.
TALLAHASSEE, FL 32301 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 MEMBER
Name ARMAS, IGNACIO
Address 5002 W LEMON STREET
City-State-Zip: TAMPA FL 33609

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: IGNACIO ARMAS

MEMBER

04/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date