

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000263137

Entity Name: MCGUFFIN SMITH CHIROPRACTIC LLC

Current Principal Place of Business:

1123 3RD STREET NORTH
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

1123 3RD STREET NORTH
JACKSONVILLE BEACH, FL 32250

FEI Number: 82-4329390

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, SUZANNE M
1123 3RD STREET NORTH
JACKSONVILLE BEACH, FL 32250 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	Title	MGR
Name	SMITH, SUZANNE M	Name	SMITH, SEAN T
Address	1123 3RD STREET NORTH	Address	1123 3RD STREET NORTH
City-State-Zip:	JACKSONVILLE BEACH FL 32250	City-State-Zip:	JACKSONVILLE BEACH FL 32250

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: SUZANNE SMITH

OWNER

01/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date