

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000116510

Entity Name: COMPREHENSIVE NEUROSPINE, LLC

Current Principal Place of Business:

3990 SHERIDAN ST.
106
HOLLYWOOD, FL 33021

Current Mailing Address:

1007 NORTH FEDERAL HIGHWAY,
SUITE 2010
FORT LAUDERDALE, FL 33304-1422 US

FEI Number: 83-0520060

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASAS REYES, CARLOS
2750 NE 14TH STREET
FORT LAUDERDALE, FL 33304 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: CARLOS CASAS REYES

06/18/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name CASAS REYES, CARLOS
Address 1007 NORTH FEDERAL HIGHWAY,
 SUITE 2010
City-State-Zip: FORT LAUDERDALE FL 33304-1422

Title MANAGER
Name WHELAN , CHRISTINE
Address 1007 NORTH FEDERAL HIGHWAY,
 SUITE 2010
City-State-Zip: FORT LAUDERDALE FL 33304-1422

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: CASAS REYES , CARLOS

PRESIDENT

06/18/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date