

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000241880

**Entity Name:** MODERN VASCULAR OF SOUTH FLORIDA, LLC

**Current Principal Place of Business:**

495 BRICKELL AVENUE  
5404  
MIAMI, FL 33131

**Current Mailing Address:**

4650 E. COTTON CENTER BLVD.  
STE 120  
PHOENIX, AZ 85040 US

**FEI Number:** 32-0585938

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REGISTERED AGENTS INC.  
7901 4TH STREET NORTH  
SUITE 300  
ST.PETERSBURG, FL 33702 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 NOBILITY MANAGEMENT, LLC  
Address 26500 AGOURA RD., STE. 201  
City-State-Zip: CALABASAS CA 91302

*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:** MARK RABINOVICH

V.P. LEGAL

06/29/2020

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date