

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000251569

Entity Name: JOSE RIVAS M.D. L.L.C.

Current Principal Place of Business:

2021 NW 136TH AVE
374
SUNRISE, FL 33323

Current Mailing Address:

2021 NW 136TH AVE
374
SUNRISE, FL 33323

FEI Number: 83-2326108

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIVAS, JOSE MD
2021 NW 136TH AVE
374
SUNRISE, FL 33323 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 RIVAS, JOSE
Address 2021 NW 136TH AVE # 374
City-State-Zip: SUNRISE FL 33323

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: JOSE RIVAS

MD

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date