

**2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

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:** JOSE RIVAS

09/28/2021

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

MANAGER

09/28/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date