

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000254719

Entity Name: AZUR FAMILY CHIROPRACTIC AND WELLNESS, LLC

Current Principal Place of Business:

7001 SW 97TH AVENUE
SUITE 106
MIAMI, FL 33173

Current Mailing Address:

7001 SW 97TH AVENUE
SUITE 106
MIAMI, FL 33173 US

FEI Number: 32-0583307

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KSDT & CO
9300 S DADELAND BLVD
STE 600
MIAMI, FL 33156 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: JEFF TARABOULOS CPA

03/14/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MIRANDA, MARGIE
Address 7001 SW 97TH AVE
City-State-Zip: SUITE 106 FL 33242

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: MARGIE MIRANDA

MGR

03/14/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date