

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000257584

Entity Name: VIVO THERAPY LLC

Current Principal Place of Business:

7010 NW 186 STREET
520A
HIALEAH, FL 33015

Current Mailing Address:

7010 NW 186 STREET
520A
HIALEAH, FL 33015

FEI Number: 83-2471657

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PINERA RUIZ, LAURA
7010 NW 186 STREET
520A
HIALEAH, FL 33015 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 PINERA RUIZ, LAURA
Address 7010 NW 186 STREET APT 520A
City-State-Zip: HIALEAH FL 33015

Title MGR
Name GONZALEZ MENESES, JOSE J
Address 7010 NW 186 STREET APT 520A
City-State-Zip: HIALEAH FL 33015

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: LAURA PINERA RUIZ

MGR

02/19/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date