

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000101920

Entity Name: VETERINARY ORTHOPAEDIC AND MOBILITY CENTER, LLC

Current Principal Place of Business:

3130 US HIGHWAY 1 SOUTH
STE B
ST. AUGUSTINE, FL 32086

Current Mailing Address:

3130 US HIGHWAY 1 SOUTH
STE B
ST. AUGUSTINE, FL 32086 US

FEI Number: 83-4393994

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HARDIE, NICOLE
3130 US HIGHWAY 1 SOUTH
STE B
ST. AUGUSTINE, FL 32086 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	Title	AMBR
Name	ERNE, JAY B	Name	HARDIE, NICOLE S
Address	3130 US HIGHWAY 1 SOUTH STE B	Address	3130 US HIGHWAY 1 SOUTH STE B
City-State-Zip:	ST. AUGUSTINE FL 32086	City-State-Zip:	ST. AUGUSTINE FL 32086

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: NICOLE HARDIE

MANAGER

01/21/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date