

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000273348

Entity Name: SORA LUGO THERAPY SERVICES LLC

Current Principal Place of Business:

1506 SE 20TH RD
HOMESTEAD, FL 33035

Current Mailing Address:

1506 SE 20TH RD
HOMESTEAD, FL 33035 US

FEI Number: 84-3843908

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SORA LUGO, OLIVIA
1506 SE 20TH RD
HOMESTEAD, FL 33035 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 SORA LUGO, OLIVIA
Address 1506 SE 20TH RD
City-State-Zip: HOMESTEAD FL 33035

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: OLIVIA SORA LUGO

MANAGER

02/19/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date