6901 INTERNA FT MYERS, FL	TIONAL CENTER BLVD . 33912			
Current Mai	ling Address:			
	NATIONAL CENTER BLVD FL 33912 US			
FEI Number: 59-2086792			Certificate of Status Desired: Yes	
Name and A	ddress of Current Registered Agent:			
BECK, ASHLE 6901 INTERNA FORT MYERS,	TIONAL CENTER BLVD			
The above name	d entity submits this statement for the purpose of changing its regis	tered office or reais	tered agent. or both. in the State of Florida.	
			J	
SIGNATURE	ASHLEY BECK		04/05/20	024
SIGNATURE				024
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent		04/05/20	024
	Electronic Signature of Registered Agent	Title	04/05/20	024
Officer/Dire	ASHLEY BECK Electronic Signature of Registered Agent ctor Detail :		04/05/20 Date	024
Officer/Dire Title	E: ASHLEY BECK Electronic Signature of Registered Agent Ctor Detail :	Title	04/05/20 Date	024
Officer/Dire Title Name	E: ASHLEY BECK Electronic Signature of Registered Agent Ctor Detail : V RASKAUSKAS, PAUL A 6901 INTERNATIONAL CENTER BLVD	Title Name Address	04/05/20 Date ST GHUMAN, AVTAR T	024
Officer/Dire Title Name Address	E: ASHLEY BECK Electronic Signature of Registered Agent Ctor Detail : V RASKAUSKAS, PAUL A 6901 INTERNATIONAL CENTER BLVD	Title Name Address	04/05/20 Date ST GHUMAN, AVTAR T 6901 INTERNATIONAL CENTER BLVD	024
Officer/Dire Title Name Address City-State-Zip:	E: ASHLEY BECK Electronic Signature of Registered Agent Ctor Detail : V RASKAUSKAS, PAUL A 6901 INTERNATIONAL CENTER BLVD FT. MYERS FL 33912	Title Name Address City-State-Zip:	04/05/20 Date ST GHUMAN, AVTAR T 6901 INTERNATIONAL CENTER BLVD FORT MYERS FL 33912	024

2024 FLORIDA PROFIT CORPORATION REINSTATEMENT

Entity Name: RETINA CONSULTANTS OF SOUTHWEST FLORIDA, P.A.

DOCUMENT# F28462

Current Principal Place of Business:

City-State-Zip: FT MYERS FL 33912

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

City-State-Zip: FT MYERS FL 33912

CEO

SIGNATURE: ASHLEY BECK

Electronic Signature of Signing Officer/Director Detail

FILED Apr 05, 2024

Secretary of State

0886002384CR