

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000116805

Entity Name: BREVARD INTERNAL MEDICINE & WALK-IN CLINIC PLLC

Current Principal Place of Business:

2795 W. NEW HAVEN AVE.
W. MELBOURNE, FL 32904

Current Mailing Address:

P O BOX 411685
MELBOURNE, FL 32941 US

FEI Number: 27-1424884

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUMAR, ARAVIND
3457 CAPPPIO DRIVE
MELBOURNE, FL 32940 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 MGRM
Name KUMAR, ARAVIND
Address 3457 CAPPPIO DRIVE
City-State-Zip: MELBOURNE FL 32940

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: ARAVIND KUMAR

MGRM

04/30/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date