2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000018395

Entity Name: MOSKOWITZ DERMATOLOGY, M.D., P.L.L.C.

Current Principal Place of Business:

143 MISSION ROAD OVIEDO, FL 32765

Current Mailing Address:

143 MISSION ROAD OVIEDO, FL 32765 US

FEI Number: 81-1011375

Name and Address of Current Registered Agent:

MOSKOWITZ, JEFFREY G 143 MISSION ROAD OVIEDO, FL 32765 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

Authorized Person(s) Detail :

| Title | MD | Title | PMGR |
|-----------------|----------------------|-----------------|------------------|
| Name | MOSKOWITZ, JEFFREY G | Name | BAUMANN, ANITA |
| Address | 143 MISSION ROAD | Address | 143 MISSION ROAD |
| City-State-Zip: | OVIEDO FL 32765 | City-State-Zip: | OVIEDO FL 32765 |

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: ANITA BAUMANN

PRACTICE MANAGER 02/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 12, 2024 Secretary of State 8562464662CC

Date

Certificate of Status Desired: Yes