## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000005809

Entity Name: PHAMILY EYE CARE, LLC

**Current Principal Place of Business:** 

2655 GULF TO BAY BLVD CLEARWATER. FL 33759

## **Current Mailing Address:**

5939 BROWDER ROAD TAMPA, FL 33625

FEI Number: 81-4825512 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PHAM, KIM N 5939 BROWDER ROAD TAMPA, FL 33625 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

FILED Apr 07, 2024

**Secretary of State** 

2764847117CC

## Authorized Person(s) Detail:

Title MGR

Name PHAM, KIM N

Address 5939 BROWDER ROAD

City-State-Zip: TAMPA FL 33625

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: KIM PHAM MANAGER 04/07/2024