

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000205160

Entity Name: SEKINE & RASNER, LLC**Current Principal Place of Business:**11945 SAN JOSE BOULEVARD, BLDG 400
JACKSONVILLE, FL 32223**Current Mailing Address:**11945 SAN JOSE BOULEVARD, BLDG 400
JACKSONVILLE, FL 32223 US**FEI Number:** 82-3031441**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SEKINE, KENNETH M. M.D.
11945 SAN JOSE BOULEVARD, BLDG 400
JACKSONVILLE, FL 32223 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:** KENNETH M. SEKINE

01/31/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|------------------------------------|
| Title | MGR |
| Name | SEKINE, KENNETH M M.D. |
| Address | 11945 SAN JOSE BOULEVARD, BLDG 400 |
| City-State-Zip: | JACKSONVILLE FL 32223 |

| | |
|-----------------|------------------------------------|
| Title | MGR |
| Name | RASNER, TODD J M.D. |
| Address | 11945 SAN JOSE BOULEVARD, BLDG 400 |
| City-State-Zip: | JACKSONVILLE FL 32223 |

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: TODD RASNER

OWNER

01/31/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date