## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000013521

Entity Name: AMUNE DIAGNOSTICS AND INTERVENTIONAL PAIN

CONSULTANTS, LLC

**Current Principal Place of Business:** 

4956 MAPLE GLEN PLACE SANFORD, FL 32771

**Current Mailing Address:** 

4956 MAPLE GLEN PLACE SANFORD, FL 32771 US

FEI Number: 83-3166344 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AMUNE, EVANS E 4956 MAPLE GLEN PLACE SANFORD, FL 32771 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 Jan 30, 2024

**Secretary of State** 

4082769978CC

## Authorized Person(s) Detail:

Title AMBR

Name AMUNE, EVANS E

Address 4956 MAPLE GLEN PLACE

City-State-Zip: SANFORD FL 32771

SIGNATURE: EVANS AMUNE

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.

Electronic Signature of Signing Authorized Person(s) Detail

01/30/2024

**AMBR** 

Date