

2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L21000267426

Entity Name: CHIPLEY ANIMAL HOSPITAL, LLC

Current Principal Place of Business:

681 MARTIN LUTHER KING DRIVE
CHIPLEY, FL 32428

Current Mailing Address:

PO BOX 774
CHIPLEY, FL 32428 US

FEI Number: 87-1164799

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KREITZ, BRIAN R DVM
1224 CLAYTON ROAD
CHIPLEY, FL 32428 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	Title	MGRM
Name	KREITZ, AMY G	Name	KREITZ, BRIAN R DVM
Address	1224 CLAYTON ROAD	Address	1224 CLAYTON ROAD
City-State-Zip:	CHIPLEY FL 32428	City-State-Zip:	CHIPLEY FL 32428

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: AMY G KREITZ

MGMR

08/07/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date