## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000407359

Entity Name: LYNN SETO M.D. LLC

**Current Principal Place of Business:** 

3600 PRESERVE BLVD

PANAMA CITY BEACH. FL 32408

**Current Mailing Address:** 

3600 PRESERVE BLVD

PANAMA CITY BEACH. FL 32408 US

FEI Number: 87-3457239 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SETO, ROBB M.D. 3600 PRESERVE BLVD PANAMA CITY BEACH, FL 32408 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** Feb 19, 2024

**Secretary of State** 

0929132641CC

Authorized Person(s) Detail:

Title MGR

Title **AMBR** 

SETO, LYNN M.D. Name SETO, ROBB M.D. Name 3600 PRESERVE BLVD 3600 PRESERVE BLVD Address Address

City-State-Zip: PANAMA CITY BEACH FL 32408 City-State-Zip: PANAMA CITY BEACH FL 32408

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: LYNN SETO MD **OWNER** Electronic Signature of Signing Authorized Person(s) Detail

02/19/2024 Date