

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000336342

Entity Name: KAYLA ANTHONY MD LLC

Current Principal Place of Business:

9200 NW 39TH AVE
STE 130 - 3308
GAINESVILLE, FL 32606

Current Mailing Address:

9200 NW 39TH AVE
STE 130 - 3308
GAINESVILLE, FL 32606

FEI Number: 88-3545407

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC
7901 4TH ST N
STE 300
ST. PETERSBURG, FL 33702 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: DAVID ROBERTS

04/08/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AP
Name ANTHONY, KAYLA DR
Address 4415 NW 50TH DRIVE, UNIT 103
City-State-Zip: GAINESVILLE FL 32606

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: KAYLA ANTHONY

AUTHORIZED PERSON

04/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date