

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000126484

Entity Name: JULIAN BRAVO M.D. PLLC

Current Principal Place of Business:

331 ANTHONY CIRCLE
CHARLOTTE, NC 28211

Current Mailing Address:

331 ANTHONY CIRCLE
CHARLOTTE, NC 28211 US

FEI Number: 81-2774579

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BRAVO, JULIAN
5036 WATERSONG WAY
FORT PIERCE, FL 34949 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 P
Name BRAVO, JULIAN
Address 331 ANTHONY CIRCLE
City-State-Zip: CHARLOTTE NC 28211

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: JULIAN BRAVO

MANAGING MEMBER

02/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date