

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M23000000944

Entity Name: CVICFL HOLDINGS, LLC**Current Principal Place of Business:**2111 SW 20TH PL.
OCALA, FL 34471**Current Mailing Address:**2111 SW 20TH PL.
OCALA, FL 34471 US**FEI Number:** 92-1630672**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GUMMADI, SIVA M.D.
2111 SW 20TH PL.
OCALA, FL 34471 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 MGR
Name GUMMADI, SIVA M.D.
Address 2111 SW 20TH PL.
City-State-Zip: Ocala FL 34471

Title MGR
Name KONERU, JAYANTH M.D.
Address 2111 SW 20TH PL.
City-State-Zip: Ocala FL 34471

Title MGR
Name MIKKILINENI, HIMA M.D.
Address 2111 SW 20TH PL.
City-State-Zip: Ocala FL 34471

Title MGR
Name PATEL, JIGAR M.D.
Address 2111 SW 20TH PL.
City-State-Zip: Ocala FL 34471

Title MGR
Name RAO, SRISHA M.D.
Address 2111 SW 20TH PL.
City-State-Zip: Ocala FL 34471

Title MGR
Name SINGH, PREMRAJAN P M.D.
Address 2111 SW 20TH PL.
City-State-Zip: Ocala FL 34471

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: SIVA GUMMADI

MGR

05/17/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date