

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037018

Entity Name: MEDICAL & EXECUTIVE OFFICES OF AVENTURA, L.L.C.

Current Principal Place of Business:

2627 NE 203RD ST
SUITE 202
AVENTURA, FL 33180

Current Mailing Address:

2627 NE 203RD ST
SUITE 202
AVENTURA, FL 33180

FEI Number: 20-2672903

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FAITH, KEVIN
2627 NE 203RD ST. #202
AVENTURA, FL 33180 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 MANAGER
Name FAITH, KEVIN
Address 2627 NE 203RD ST
 SUITE 202
City-State-Zip: AVENTURA FL 33180

Title MANAGER
Name FAITH, ROLAND
Address 2627 NE 203RD ST
 SUITE 202
City-State-Zip: AVENTURA FL 33180

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: ROLAND FAITH

MGR

04/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date