

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083997

Entity Name: ANIMAL EMERGENCY CLINIC OF DEERFIELD BEACH, LLC

Current Principal Place of Business:

103 N. POWERLINE ROAD
DEERFIELD BEACH, FL 33442

Current Mailing Address:

103 N. POWERLINE ROAD
DEERFIELD BEACH, FL 33442

FEI Number: 26-0798602

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PADILLA, RODOLFO
103 N POWERLINE RD
DEERFIELD BEACH, FL 33442 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 MGRM
Name PADILLA, RODOLFO H
Address 200 LESLIE DR. APT 914
City-State-Zip: HALLANDALE BEACH FL 33009

Title MGRM
Name HERRERA, MARTHA L
Address 200 LESLIE DR. APT 914
City-State-Zip: HALLANDALE BEACH FL 33009

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: RODOLFO PADILLA

MGRM

03/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date