## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000108518

Entity Name: CAROLYN CHOW, M.D., L.L.C.

**Current Principal Place of Business:** 

4400 SOUTH OCEAN BLVD HIGHLAND BEACH. FL 33487

**Current Mailing Address:** 

4400 SOUTH OCEAN BLVD. HIGHLAND BEACH. FL 33487 US

FEI Number: 80-0498174 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHOW, CAROLYN E. DR. 4400 SOUTH OCEAN BLVD HIGHLAND BEACH, FL 33487 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: CAROLYN CHOW 04/07/2022

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MGRM

NameCHOW, CAROLYN E. MDNameCHOW, MONIKA YAddress4400 SOUTH OCEAN BLVDAddress7252 GULF WAYCity-State-Zip:HIGHLAND BEACH FL 33487City-State-Zip:HUDSON FL 34667

Title MGRM

Name CHOW, SAMSON
Address 7252 GULF WAY
City-State-Zip: HUDSON FL 34667

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: CAROLYN ELSIE CHOW

DR.

04/07/2022 Date

FILED Apr 07, 2022

**Secretary of State** 

8926347040CC

Date