

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000032910

Entity Name: ADVANCED EAR, NOSE, THROAT ASSOCIATES, LLC

Current Principal Place of Business:

1560 ROBERTS DR
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

1560 ROBERTS DR
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 45-0704201

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADVANCED EAR, NOSE, THROAT ASSOCIATS
1560 ROBERTS DR
JACKSONVILLE BEACH, FL 32250 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: KUNAL THAKKAR

01/03/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED MEMBER
Name THAKKAR, KUNAL
Address 1560 ROBERTS DR
City-State-Zip: JACKSONVILLE BEACH FL 32250

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: KUNAL THAKKAR

PRESIDENT

01/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date