

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000047585

**Entity Name:** ACCESS IPC LLC

**Current Principal Place of Business:**

2014 SOUTH ORANGE AVE  
SUITE 200  
ORLANDO, FL 32806

**Current Mailing Address:**

2014 SOUTH ORANGE AVE  
SUITE 200  
ORLANDO, FL 32806 US

**FEI Number:** 81-1780476

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ACCESS HEALTHCARE OF ORLANDO, INC.  
2014 SOUTH ORANGE AVE  
SUITE 200  
ORLANDO, FL 32806 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:** APRIL CLOSE

03/20/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name ACCESS HEALTHCARE OF ORLANDO,  
INC.  
Address 2014 SOUTH ORANGE AVE #200  
City-State-Zip: ORLANDO FL 32806

*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:** APRIL CLOSE

AMBR

03/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date