

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000083416

Entity Name: FRANCOIS RONY ROCHE, MD, PLLC

Current Principal Place of Business:

21 GLEN LAUREL DR
ST JOHNS, FL 32259

Current Mailing Address:

PO BOX 600381
JACKSONVILLE, FL 32260

FEI Number: 45-4541931

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROCHE, FRANCOIS R
21 GLEN LAUREL DR
ST JOHNS, FL 32259 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 MGR
Name ROCHE, FRANCOIS R
Address 21 GLEN LAUREL DR
City-State-Zip: ST JOHNS FL 32259

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: FRANCOIS RONY ROCHE

MANAGER

01/23/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date