

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000214567

Entity Name: ALL FAMILY PHARMACY LLC

Current Principal Place of Business:

3350 NW 2ND AVENUE
SUITE A-34
BOCA RATON, FL 33431

Current Mailing Address:

3350 NW 2ND AVE
STE A34
BOCA RATON, FL 33431 US

FEI Number: 82-3158071

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUENZLER, THOMAS WILLIAM
3350 NW 2ND AVENUE
SUITE A-34
BOCA RATON, FL 33431 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: THOMAS KUENZLER

04/02/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name KUENZLER, THOMAS WILLIAM
Address 8576 DEARBORN RIVER WAY
City-State-Zip: BOCA RATON FL 33496

Title AMBR
Name KUENZLER, MICHAEL FRANK
Address 8275 OCEANUS DRIVE
City-State-Zip: BOCA RATON FL 33496

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: THOMAS KUENZLER

AMBR

04/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date