

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000221004

Entity Name: AK CONSULTANTS & HEALTHCARE, LLC

Current Principal Place of Business:

4532 W KENNEDY BLVD.
303
TAMPA, FL 33609

Current Mailing Address:

4532 W KENNEDY BLVD.
303
TAMPA, FL 33609 US

FEI Number: 82-3209249

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROTHBURD, CRAIG ESQ.
320 W. KENNEDY BLVD.
700
TAMPA, FL 33606 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: CRAIG ROTHBURD

02/05/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED MANAGING MEMBER
Name KIRSTEN, ASHLEIGH M
Address 4532 W KENNEDY BLVD.
303
City-State-Zip: TAMPA FL 33609

Title MEMBER
Name HARTMAN, RONALD
Address 4532 W KENNEDY BLVD.
303
City-State-Zip: TAMPA FL 33609

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: ASHLEIGH KIRSTEN

AUTHORIZED MANAGING MEMBER 02/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date