

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000063262

Entity Name: AGAVE AZUL DOCTOR PHILLIPS LLC

Current Principal Place of Business:

3771 BRANTLEY PLACE CIR
APOPKA, FL 32703

Current Mailing Address:

501 N ORLANDO AVE 313 - 340
WINTER PARK, FL 32789 US

FEI Number: 82-4782985

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIOS, JUAN
3771 BRANTLEY PLACE CIRCLE
APOPKA, FL 32703 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: JUAN RIOS

01/02/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name RIOS, JOEL
Address 3771 BRANTLEY CIRCLE
City-State-Zip: APOPKA FL 32703

Title MGR
Name RIOS, JUAN
Address 3771 BRANTLEY PLACE CIRCLE
City-State-Zip: APOPKA FL 32703

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: JOEL RIOS

MGR

01/02/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date