#### 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000050681

Entity Name: DIGESTIVE AND LIVER DISEASE INSTITUTE OF FLORIDA, LLC.

FILED
Apr 22, 2021
Secretary of State
3136211281CC

## **Current Principal Place of Business:**

505 W OAK ST SUITE 202

KISSIMMEE, FL 34741

### **Current Mailing Address:**

5418 OSPREY ISLE LANE ORLANDO, FL 32819

FEI Number: 83-3826911 Certificate of Status Desired: No

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

HAQUE, AMIN 7232 W SAND LAKE ROAD SUITE 205 ORLANDO, FL 32819 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 ATIQUZZAMAN, BASHER M Address 5418 OSPREY ISLE LANE City-State-Zip: ORANGE CITY FL 32819

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.