2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2025
Secretary of State
7606014772CC

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

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.

SIGNATURE: BASHER ATIQUZZAMAN MGR 04/28/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date