2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000096832

FILED
Mar 10, 2025
Secretary of State
1536313446CC

Entity Name: ENT AND ALLERGY ASSOCIATES OF FLORIDA, LLC

Current Principal Place of Business:

1601 CLINT MOORE RD SUITE 215
BOCA RATON, FL 33487

Current Mailing Address:

1601 CLINT MOORE RD SUITE 215
BOCA RATON, FL 33487 US

FEI Number: 65-0790741

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLUM, TODD S
1601 CLINT MOORE RD SUITE 215
BOCA RATON, FL 33487 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	NACHLAS, NATHAN DR.
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487

Title	MGR
Name	ARONSOHN, MICHAEL DR.
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487

Title	MGR
Name	OLSON, TERRY DR.
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487

Title	MANAGER
Name	DAUBE, DANIEL DR.
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487

Title	MGR
Name	WIRTSCHAFTER, ARI DR.
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487

Title	MGR
Name	LANZA, JOHN DR.
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487

Title	MGR
Name	GALIN, MICHAEL DR.
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487

Title	MANAGER
Name	JOHNSON, CURTIS DR.
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487

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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: TODD BLUM CEO 03/10/2025

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

Authorized Person(s) Detail Continued :

Title	CEO
Name	BLUM, TODD PHD
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487

Title	MANAGER
Name	POWELL, SCOTT DR.
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487

Title	MANAGER
Name	RIVERA, MIGUEL DR.
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487

Title	MANAGER
Name	SCOTCH, BRETT DR.
Address	1601 CLINT MOORE RD SUITE 215
City-State-Zip:	BOCA RATON FL 33487