2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000096832

Entity Name: ENT AND ALLERGY ASSOCIATES OF FLORIDA, LLC

FILED
Mar 21, 2022
Secretary of State
7696733257CC

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 Title MGR

Name NACHLAS, NATHAN DR. Name WIRTSCHAFTER, ARI DR.

Address 1601 CLINT MOORE RD SUITE 215 Address 1601 CLINT MOORE RD SUITE 215

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title MGR Title MGR

Name ARONSOHN, MICHAEL DR. Name LANZA, JOHN DR.

Address 1601 CLINT MOORE RD SUITE 215 Address 1601 CLINT MOORE RD SUITE 215

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title MGR Title MGR

Name OLSON, TERRY DR. Name GALIN, MICHAEL DR.

Address 1601 CLINT MOORE RD SUITE 215 Address 1601 CLINT MOORE RD SUITE 215

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title MANAGER Title MANAGER

Name DAUBE, DANIEL DR. Name JOHNSON, CURTIS DR.

Address 1601 CLINT MOORE RD SUITE 215 Address 1601 CLINT MOORE RD SUITE 215

City-State-Zip: BOCA RATON FL 33487 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 03/21/2022

Authorized Person(s) Detail Continued:

Title CEO Title MANAGER

Name BLUM, TODD PHD Name RIVERA, MIGUEL DR.

Address 1601 CLINT MOORE RD SUITE 215 Address 1601 CLINT MOORE RD SUITE 215

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title MANAGER Title MANAGER

Name POWELL, SCOTT DR. Name SCOTCH, BRETT DR.

Address 1601 CLINT MOORE RD SUITE 215 Address 1601 CLINT MOORE RD SUITE 215

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