

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000249822

Entity Name: JENKINS VETERINARY SERVICES, LLC

Current Principal Place of Business:

900 PONCE DE LEON BLVD.
BROOKSVILLE, FL 34601

Current Mailing Address:

P.O. BOX 129
LECANTO, FL 34460 US

FEI Number: 85-2709530

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JENKINS, SETH A DVM
900 PONCE DE LEON BLVD.
BROOKSVILLE, FL 34601 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	AMBR	Title	AMBR
Name	JENKINS, SETH A DVM	Name	JENKINS, SHELBY M
Address	P.O. BOX 129	Address	P.O. BOX 129
City-State-Zip:	LECANTO FL 34460	City-State-Zip:	LECANTO FL 34460

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: SETH JENKINS

MEMBER

02/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date