

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000076939

**Entity Name:** CZ RHEUMATOLOGY, LLC

**Current Principal Place of Business:**

9750 NW 33RD STREET  
SUITE 204  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

9750 NW 33RD STREET  
CORAL SPRINGS, FL 33065 US

**FEI Number:** 86-2275527

**Certificate of Status Desired:** No

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

ZIEMBINSKI, CONRAD DR.  
221 MERIDIAN AVENUE  
APT. 202  
MIAMI BEACH, FL 33139 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 ZIEMBINSKI, CONRAD DR.  
Address 221 MERIDIAN AVENUE, APT. 202  
City-State-Zip: MIAMI BEACH FL 33139

*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:** CONRAD ZIEMBINSKI

MGR

01/24/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date