

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000137907

**Entity Name:** VISION SIGHT OPTOMETRY, LLC

**Current Principal Place of Business:**

4666 SW 75TH WAY  
DAVIE, FL 33314

**Current Mailing Address:**

4666 SW 75TH WAY  
DAVIE, FL 33314 UN

**FEI Number:** 86-3091160

**Certificate of Status Desired:** No

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

AMBERG, AMANDA  
4666 SW 75TH WAY  
DAVIE, FL 33314 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  
Name AMBERG, AMANDA  
Address 4666 SW 75TH WAY  
City-State-Zip: DAVIE FL 33314

*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:** AMANDA AMBERG

AMBR

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date