

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000443951

**Entity Name:** ROBERT OKIN MD LLC

**Current Principal Place of Business:**

1650 AETNA SPRINGS LANE  
POPE VALLEY, CA 94567

**Current Mailing Address:**

1650 AETNA SPRINGS LANE  
POPE VALLEY, CA 94567

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ZENBUSINESS INC.  
336 E. COLLEGE AVE.  
SUITE 301  
TALLAHASSEE, FL 32301 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:** KHADIJEH HEMMATI

04/12/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name OKIN, ROBERT L MD  
Address 1650 AETNA SPRINGS LANE  
City-State-Zip: POPE VALLEY CA 94567

*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:** ROBERT L OKIN MD

MEMBER

04/12/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date