# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000010970

Entity Name: LUCIANA CHECKVER, M.D., PLLC.

### **Current Principal Place of Business:**

14875 SW 40TH STREET DAVIE, FL 33331

# **Current Mailing Address:**

14875 SW 40TH STREET DAVIE, FL 33331 US

# FEI Number: 92-1740919

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

CHECKVER, LUCIANA 14875 SW 40TH STREET DAVIE, FL 33331 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: LUCIANA CHECKVER

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title	MGR
Name	CHECKVER, LUCIANA B
Address	14875 SW 40TH STREET
City-State-Zip:	DAVIE FL 33331

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: LUCIANA CHECKVER

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 13, 2024 Secretary of State 2435259679CC

Certificate of Status Desired: No

03/13/2024

Date

03/13/2024 Date