## **2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000075500

Entity Name: ROSADO FAMILY CHIROPRACTIC

**Current Principal Place of Business:** 

2701 KURT ST EUSTIS, FL 32726

## **Current Mailing Address:**

2701 KURT ST EUSTIS, FL 32726

FEI Number: 92-2424761 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

ROSADO, RAFAEL 2701 KURT ST EUSTIS, FL 32726 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

FILED Mar 20, 2025

**Secretary of State** 

1633732988CC

## Authorized Person(s) Detail:

Title AR

Name ROSADO, RAFAEL I
Address 2701 KURT ST
City-State-Zip: EUSTIS FL 32726

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: RAFAEL I ROSADO

03/20/2025