

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000355741

Entity Name: GERSON RODRIGUEZ MD, PLLC

Current Principal Place of Business:

194 BROADLEAF LANE
ST. JOHNS, FL 32259

Current Mailing Address:

194 BROADLEAF LANE
ST. JOHNS, FL 32259 US

FEI Number: 92-3760801

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBINSON COLLINS, P.L.
1604 STOCKTON STREET
JACKSONVILLE, FL 32204 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	Title	MGR
Name	RODRIGUEZ, GERSON	Name	RODRIGUEZ, JAMIE
Address	194 BROADLEAF LANE	Address	194 BROADLEAF LANE
City-State-Zip:	ST. JOHNS FL 32259	City-State-Zip:	ST. JOHNS FL 32259

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: JAMIE RODRIGUEZ

MANAGER

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date