

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000420052

Entity Name: RIVERA COLLET INTEGRATED HEALTH LLC

Current Principal Place of Business:

2650 DADE AVE
1125
ORLANDO, FL 32804

Current Mailing Address:

2650 DADE AVE
1125
ORLANDO, FL 32804 US

FEI Number: 33-1345415

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIVERA COLLET, CESAR J
2650 DADE AVE
1125
ORLANDO, FL 32804 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 RIVERA COLLET, CESAR J
Address 2650 DADE AVE 1125
City-State-Zip: ORLANDO FL 32804

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: CESAR J RIVERA COLLET

AMBR

04/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date