## **2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000006991

Entity Name: INDEPENDENT PRACTICE SUPPORT, LLC

**Current Principal Place of Business:** 

17035 RAINBOW FALLS TRAIL BOCA RATON. FL 33496

## **Current Mailing Address:**

17035 RAINBOW FALLS TRAIL BOCA RATON, FL 33496 US

FEI Number: 88-0606452 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC. 801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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

Authorized Person(s) Detail:

Title M Title I

Name CECOP INNOVATION CORP. Name MACIAS, IGNACIO

Address 17035 RAINBOW FALLS TRAIL Address 17035 RAINBOW FALLS TRAIL

City-State-Zip: BOCA RATON FL 33496 City-State-Zip: BOCA RATON FL 33496

Title VP

Name ALVORD, BRENT

Address 17035 RAINBOW FALLS TRAIL

City-State-Zip: BOCA RATON FL 33496

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.

Ρ

SIGNATURE: IGNACIO MACIAS

04/25/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 25, 2024

**Secretary of State** 

3838251252CC

Date