



## JOHN AYOTUNDE KEHINDE

License Number: PS63153

Data As Of 12/22/2024

Profession Pharmacist  
 License PS63153  
 License Status EMERG SUSPENS/  
 Qualifications Certified To Administer Immunizations  
 License Expiration Date 9/30/2025  
 License Original Issue Date 09/02/2021  
 Address of Record 18540 N Dale Mabry  
 LUTZ, FL 33548  
 Discipline on File No  
 Public Complaint Yes  
 Alerts Enforcement Alert  
 2/2/2024 5:02:31 PM  
 Order of Emergency Suspension of License filed, 02/02/2024.

### Secondary Locations

No secondary locations found.

### Discipline/Admin Action

#### Emergency Actions

Name	License	Profession	City	County	State	Case #	Action Taken	Action Date
KEHINDE, JOHN	63153	PHARMACIST	LUTZ	HILLSBOROUGH	FL	202320666	ESO ISSUED	02/02/2024

#### Discipline Cases

No Discipline Found

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
KEHINDE, JOHN AYOTUNDE	63153	PHARMACIST	LUTZ	FL	202320666	AC FILED
KEHINDE, JOHN AYOTUNDE	63153	PHARMACIST	LUTZ	FL	202320666	AC FILED

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

[Discipline Public Records Request](#)

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at:  
 Division of Medical Quality Assurance  
 Public Records  
 4052 Bald Cypress Way, Bin C01  
 Tallahassee, FL 32399-3251

Please include the following:

1. Full name and license number of the practitioner;
2. Name and address where documents are to be sent; and

3. If you require certification of the documents, a \$25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

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