2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2024
Secretary of State
5046308661CC

DOCUMENT# L05000046272

Entity Name: MAIKA HEALTHCARE, LLC

Current Principal Place of Business:

6446 E BAY BLVD
GULF BREEZE, FL 32563

Current Mailing Address:

6446 E BAY BLVD
GULF BREEZE, FL 32563 US

FEI Number: 20-2814172

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRAN, MARK M.D.
6446 E BAY BLVD
GULF BREEZE, FL 32563 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	MGRM
Name	TRAN, MARK M.D.
Address	6446 E BAY BLVD
City-State-Zip:	GULF BREEZE FL 32563

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: MARK TRAN OFFICER/OWNER 01/31/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date