

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000121237

Entity Name: MED-ASSIST CONSULTING GROUP, LLC

Current Principal Place of Business:

16900 NE 19 AVE
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

16900 NE 19TH AVENUE
NORTH MIAMI BEACH, FL 33162 US

FEI Number: 27-1962280

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIPSON, STUART A, ESQ.
16900 NE 19TH AVENUE
NORTH MIAMI BEACH, FL 33162 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: STUART A LIPSON

02/02/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name CORTES, GLADYS M
Address 16900 NE 19TH AVENUE
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title MGRM
Name CORTES, JORGE
Address 16900 NE 19TH AVENUE
City-State-Zip: NORTH MIAMI BEACH FL 33162

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: JORGE CORTES

MGRM

02/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date