## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000031816

Entity Name: PURE PHARMACY L.L.C

Current Principal Place of Business:

959 WEST AVE SUITE # 16

MIAMI BEACH, FL 33139

## **Current Mailing Address:**

959 WEST AVE SUITE # 16 MIAMI BEACH, FL 33139 US

FEI Number: 27-2247481 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MIAL GROUP INC. 1200 W AVE #720 MIAMI BEACH, FL 33139 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

FILED Mar 15, 2021

**Secretary of State** 

2551496779CC

## Authorized Person(s) Detail:

Title MGRM

Name MIAL GROUP LLC Address 1200 W AVE #720

City-State-Zip: MIAMI BEACH FL 33139

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.