## **2023 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:

YOLOFSKY LAW PA 100 SE 3RD AVENUE SUITE #1000

FORT LAUDERDALE, FL 33394 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: A.J. YOLOFSKY 04/27/2023

Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MGRM

Name MIAL GROUP LLC
Address 4707 ALTON ROAD

City-State-Zip: MIAMI BEACH FL 33140

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: MISHAL ALSABBAGH PRESIDENT 04/27/2023

FILED Apr 27, 2023

**Secretary of State** 

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