## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000054824

**Entity Name: ALPMEDICA LLC** 

**Current Principal Place of Business:** 

15811 COLLINS AVE #1706

SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:** 

15811 COLLINS AVE #1706

SUNNY ISLES BEACH, FL 33160

FEI Number: 47-2465453 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STOMA, OLEG V 15811 COLLINS AVE #1706

SUNNY ISLES BEACH, FL 33160 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** Jan 05, 2022

**Secretary of State** 

6768089711CC

## Authorized Person(s) Detail:

Title MGR

STOMA, OLEG Name

15811 COLLINS AVE., #1706 Address City-State-Zip: SUNNY ISLES BEACH FL 33160

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.