

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000075731

Entity Name: PHYCORE MEDICAL LLC

Current Principal Place of Business:

8866 DARLENE DRIVE
ORLANDO, FL 32836

Current Mailing Address:

8866 DARLENE DRIVE
ORLANDO, FL 32836 US

FEI Number: 46-3051038

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KHAN, MUHAMMAD A
8866 DARLENE DRIVE
ORLANDO, FL 32836 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: C NICK ASMA

05/21/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	KHAN, MUHAMMAD A	Name	KHAN, JENNIFER H
Address	8866 DARLENE DRIVE	Address	8866 DARLENE DRIVE
City-State-Zip:	ORLANDO FL 32836	City-State-Zip:	ORLANDO FL 32836

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: MUHAMMAD AMIR KHAN

MANAGER

05/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date