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: EFRAIN E. SORA

Electronic Signature of Signing Authorized Person(s) Detail

PRESIDENT

Entity Name: SORA GLOBAL EXECUTIVE MEDICAL SERVICES, LLC **Current Principal Place of Business:**

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

C/O SORA GLOBAL LLC 2332 GALIANO ST. 2ND FLOOR CORAL GABLES, FL 33134

DOCUMENT# L13000133702

Current Mailing Address:

C/O SORA GLOBAL LLC 2332 GALIANO ST. 2ND FLOOR MIAMI, FL 33134 US

FEI Number: 46-5468414

Name and Address of Current Registered Agent:

SORA GLOBAL LLC 1530 SW 139 AVE MIAMI, FL 33184 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	GNATURE: EFRAIN E SORA				
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGR	Title	MGR		
Name	SORA, EFRAIN E	Name	SORA GLOBAL LLC		
Address	1530 SW 139 AVE	Address	2332 GALIANO ST.		
City-State-Zip: I	MIAMI FL 33184		2ND FLOOR		
		City-State-Zip:	CORAL GABLES FL 33134		

Certificate of Status Desired: No