

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000020991

Entity Name: VAUGHAN MEDICAL LLC

Current Principal Place of Business:

8890 W OAKLAND PARK BLVD
SUITE 304
SUNRISE, FL 33351

Current Mailing Address:

PO BOX 550786
FORT LAUDERDALE, FL 33355-0786 US

FEI Number: 35-2526593

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE RUNYAN LAW FIRM, PA
1515 NE 26TH ST, WILTON MANORS,
WILTON MANORS, 1515
FORT LAUDERDALE, FL 33305 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

Authorized Person(s) Detail :

Title MGR
Name DANIELS-HEPNAR, VAUGHAN
Address 1856 N NOB HILL RD#413
City-State-Zip: PLANTATION FL 33322

Title MANAGER
Name PERELMAN, JASON
Address 1856 N NOB HILL RD #413
City-State-Zip: PLANTATION FL 33322

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: JASON PERELMAN

MGR

04/24/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date