## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000034840

Entity Name: INTENSIVE CARE PRODUCTS, LLC.

**Current Principal Place of Business:** 

3530 MYSTIC POINTE DR APT 1401 AVENTURA, FL 33180

**Current Mailing Address:** 

3530 MYSTIC POINTE DR APT 1401 AVENTURA, FL 33180 US

FEI Number: 47-3240259 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

A & J TAX SERVICE 1 INC 2620 BUTTONWOOD AVE MIRAMAR, FL 33025-2414 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: JULIAN FERRER 03/24/2021

Electronic Signature of Registered Agent

Date

FILED Mar 24, 2021

**Secretary of State** 

8715052195CC

Authorized Person(s) Detail:

APT 1401

Title MANAGER Title MANAGER

Name PERTICAROLI, RODOLFO P Name LEVI, CAROLINA N

Address 3530 MYSTIC POINTE DR Address 3530 MYSTIC POINTE DR

APT 1401

City-State-Zip: AVENTURA FL 33180 City-State-Zip: AVENTURA FL 33180

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: RODOLFO PERTICAROLI

**PRESIDENT** 

03/24/2021