

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000149956

**Entity Name:** GANESHKRUPA, LLC

**Current Principal Place of Business:**

502 SUNPORT LN  
SUITE 550  
ORLANDO, FL 32809

**FILED**  
**Apr 09, 2024**  
**Secretary of State**  
**4711765758CC**

**Current Mailing Address:**

15461 SW 12TH STREET  
SUITE 108  
SUNRISE, FL 33326 US

**FEI Number: 81-3600878**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

SPECIALTY RX HOLDINGS TAMPA, LLC  
15461 SW 12TH STREET  
SUITE 108  
SUNRISE, FL 33326 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:** ELIEZER SCHWARTZ

04/09/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED REPRESENTATIVE  
Name SCHWARTZ, ELIEZER  
Address 15461 SW 12TH STREET  
SUITE 108  
City-State-Zip: SUNRISE FL 33326

Title AUTHORIZED MEMBER  
Name SPECIALTY RX HOLDINGS TAMPA,  
LLC  
Address 15461 SW 12TH STREET  
SUITE 108  
City-State-Zip: SUNRISE FL 33326

*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:** JOEL ZUPNICK

CEO

04/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date