

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000219943

**Entity Name:** GLOMED, LLC

**Current Principal Place of Business:**

2908 RIVERVIEW DR.  
MELBOURNE, FL 32901

**Current Mailing Address:**

2908 RIVERVIEW DR.  
MELBOURNE, FL 32901 US

**FEI Number: 81-4612910**

**Certificate of Status Desired: No**

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

FLAVIN NOONEY & PERSON CPAS  
2200 S. BABCOCK ST.  
MELBOURNE, FL 32901 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: DESIREE HAYES**

**04/27/2024**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	REGISTERED AGENT
Name	AMIN, NAUSHAD	Name	FLAVIN NOONEY & PERSON CPAS
Address	2908 RIVERVIEW DR	Address	2200 S. BABCOCK STREET
City-State-Zip:	MELBOURNE FL 32901	City-State-Zip:	MELBOURNE FL 32901

*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: NAUSHAD AMIN**

**MR.**

**04/27/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date