

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000128883

Entity Name: A2Z PHARMACONSULTING, LLC

Current Principal Place of Business:

5179 FLICKER FIELD CIR
SARASOTA, FL 34231

Current Mailing Address:

5179 FLICKER FIELD CIR
SARASOTA, FL 34231 US

FEI Number: 82-1909984

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202 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 AMBR
Name DROST, DAWN M
Address 5179 FLICKER FIELD CIR
City-State-Zip: SARASOTA FL 34231

Title AMBR
Name DROST, KENNETH P
Address 5179 FLICKER FIELD CIR
City-State-Zip: SARASOTA FL 34231

Title MGR
Name DROST, KENNETH P
Address 5179 FLICKER FIELD CIR
City-State-Zip: SARASOTA FL 34231

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: DROST, KENNETH P

MANAGER

03/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date