

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000232363

**Entity Name:** REFOCUS LLC

**Current Principal Place of Business:**

8050 N UNIVERSITY DR STE 206  
TAMARAC, FL 33321

**Current Mailing Address:**

8050 N UNIVERSITY DR STE 206  
TAMARAC, FL 33321 US

**FEI Number:** 83-2126283

**Certificate of Status Desired:** No

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

CHAVERRA, RUTH  
8050 N UNIVERSITY DR STE 206  
TAMARAC, FL 33321 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:** RUTH CHAVERRA

04/24/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name MONTALVO, TROY  
Address 3111 N OCEAN DR APT 1011  
City-State-Zip: HOLLYWOOD FL 33019

Title AMBR  
Name CHAVERRA, RUTH  
Address 3111 N OCEAN DR APT 1011  
City-State-Zip: HOLLYWOOD FL 33019

*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:** RUTH CHAVERRA

AMBR

04/24/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date