

2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L19000237568

Entity Name: EMERALD MEDICAL, LLC

Current Principal Place of Business:

6200 20TH ST
STE #378
VERO BEACH, FL 32966

Current Mailing Address:

2160 58TH AVE
#318
VERO BEACH, FL 32966 US

FEI Number: 84-5140342

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRISTOPHER , HASENAUER
6200 20TH ST
STE 378
VERO BEACH, FL 32966 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: KRISTOPHER HASENAUER

04/29/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name HASENAUER, KRISTOPHER S
Address 2160 58TH AVE
#318
City-State-Zip: VERO BEACH FL 32966

Title MANAGER
Name AGOSTO, EDIL J DR.
Address 2160 58TH AVE
#318
City-State-Zip: VERO BEACH FL 32966

Title MANAGER
Name MARQUEZ AYALA, ADRIAN
Address 2160 58TH AVE
#318
City-State-Zip: VERO BEACH FL 32966

Title COO
Name AMANDA, ESPINAL
Address 2160 58TH AVE
#318
City-State-Zip: VERO BEACH FL 32966

Title OFFICE MANAGER
Name SCHNEEBERG, NICOLE
Address 501 NW UNIVERSITY BLVD
City-State-Zip: PORT ST. LUCIE FL 34986

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: AMANDA ESPINAL

COO

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date