## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000265215

Entity Name: CASH NOW DIABETIC SURPLUS LLC

**Current Principal Place of Business:** 

2545 HILLSDALE AVE SUITE B

LARGO, 33774

## **Current Mailing Address:**

303 PONCE DE LEON BLVD BELLEAIR, FL 33756 US

FEI Number: 84-3621138 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

CORNELL, MICHAEL J 2545 HILLSDALE AVE SUITE B LARGO, FL 33774 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

**FILED** Jan 25, 2024

**Secretary of State** 

6273074169CC

## Authorized Person(s) Detail:

Title **OWNE** 

CORNELL, MICHAEL J Name 2545 HILLSDALE AVE Address

SUITE B

SIGNATURE: MICHAEL CORNELL

City-State-Zip: LARGO FL 33774

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.

MR

Electronic Signature of Signing Authorized Person(s) Detail

01/25/2024

Date