

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000055790

Entity Name: ADVANCED PHARMACY SOLUTIONS LLC

Current Principal Place of Business:

11520 SW 43 ST
MIAMI, FL 33165

Current Mailing Address:

11520 SW 43 ST
MIAMI, FL 33165 US

FEI Number: 84-4905749

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALVAREZ, HILDA
11520 SW 43 ST
MIAMI, FL 33165 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 ALVAREZ, HILDA
Address 11520 SW 43 ST
City-State-Zip: MIAMI FL 33165

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: HILDA ALVAREZ

REGISTERED AGENT

04/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date