

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000230047

Entity Name: MEDLIFE CONSULTING LLC

Current Principal Place of Business:

441 MADEIRA AVE
CORAL GABLES, FL 33134

Current Mailing Address:

441 MADEIRA AVE
CORAL GABLES, FL 33134 US

FEI Number: 85-2672906

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LALCHANDANI SIMON PL
25 SE 2ND AVE.
SUITE 1020
MIAMI, FL 33131 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: DANIEL J. SIMON

03/05/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name ASKARI, HODA
Address 441 MADEIRA AVE
City-State-Zip: CORAL GABLES FL 33134

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: HODA ASKARI

MGR

03/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date