

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000396314

**Entity Name:** MED-RELEAF LLC

**Current Principal Place of Business:**

524 JOG RD  
WEST PALM BEACH, FL 33415

**Current Mailing Address:**

5214 BETHANY LANE  
HAVERHILL, FL 33415

**FEI Number:** 86-1877035

**Certificate of Status Desired:** Yes

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

TABARES, STEVEN  
524 JOG ROAD  
WEST PALM BEACH, FL 33415 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 MGR  
Name ROMERO, CINTHIA  
Address 5214 BETHANY LANE  
City-State-Zip: HAVERHILL FL 33415

*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:** ROMERO CINTHIA

02/03/2022

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date