

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000005046

Entity Name: GAINESVILLE MEDICAL RECYCLING LLC

Current Principal Place of Business:

709 NW 19TH LANE
GAINESVILLE, FL 32609

Current Mailing Address:

PO BOX 357551
GAINESVILLE, FL 32635

FEI Number: 86-1332958

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOLSON, LEONARD E
709 NW 19TH LANE
GAINESVILLE, FL 32609 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 GOLSON, LEONARD E
Address 709 NW 19TH LANE
City-State-Zip: GAINESVILLE FL 32609

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: LEONARD GOLSON

MGR

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date