

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000140069

**Entity Name:** MEDIFAR SALUD LLC

**Current Principal Place of Business:**

3401 N COUNTRY CLUB DR  
APT 302  
AVENTURA,, FL 33180

**Current Mailing Address:**

3401 N COUNTRY CLUB DR  
APT 302  
AVENTURA,, FL 33180

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

HURTADO, OTTO  
3401 N COUNTRY CLUB DR  
APT 302  
AVENTURA, FL 33180 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 MERCADO GRAU, ANTONIO J  
Address 3401 N COUNTRY CLUB DR APT 302  
City-State-Zip: AVENTURA FL 33180

*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:** MERCADO GRAU, ANTONIO J

MGR

04/30/2022

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

\_\_\_\_\_  
Date