

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000276947

Entity Name: MEANINGFUL MEDICINE, LLC

Current Principal Place of Business:

4809 N ARMENIA AVE UNIT 240
TAMPA, FL 33603

Current Mailing Address:

4809 N ARMENIA AVE UNIT 240
TAMPA, FL 33603 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
801 US HWY 1
NORTH PALM BEACH, FL 33408 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: JON-MICHAEL SANCHEZ, SPECIAL SECRETARY

04/29/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name MD, ANNETTE BOSWORTH
Address 4809 N ARMENIA AVE UNIT 240
City-State-Zip: TAMPA FL 33603

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: ANNETTE BOSWORTH MD

MANAGER, BY JON-
MICHAEL SANCHEZ,
ATTORNEY-IN-FACT

04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date