

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000301931

**Entity Name:** VITOLOGY MED LLC

**Current Principal Place of Business:**

7208 W SAND LAKE RD  
STE 302  
ORLANDO, FL 32819

**Current Mailing Address:**

7208 W SAND LAKE RD  
STE 302  
ORLANDO, FL 32819 US

**FEI Number:** 87-1492221

**Certificate of Status Desired:** Yes

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

NIEVES-RAMOS, RICARDO FRANCISCO DR.  
7208 W SAND LAKE RD  
STE 302  
ORLANDO, FL 32819 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:** RICARDO NIEVES-RAMOS

04/29/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name RAMOS, RICARDO NIEVES  
Address 7208 W SAND LAKE RD  
STE 302  
City-State-Zip: ORLANDO FL 32819

*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:** RICARDO NIEVES-RAMOS

OWNER

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date