

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000079928

Entity Name: MODI MEDICAL PLLC

Current Principal Place of Business:

8980 W FLAGLER ST
214
MIAMI, FL 33174

Current Mailing Address:

8980 W FLAGLER ST
214
MIAMI, FL 33174 US

FEI Number: 88-1002335

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MODI, AADIL
8980 W FLAGLER ST
214
MIAMI, FL 33174 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: AADIL MODI

04/02/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MODI, AADIL
Address 8980 W FLAGLER ST #214
City-State-Zip: MIAMI FL 33147

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: AADIL MODI

MANAGER

04/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date