## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000108410

Entity Name: ATLAS ROSPITAL DISTRIBUTION I, LLC

**Current Principal Place of Business:** 

4401 EAST 10TH AVE HIALEAH, FL 33013

**Current Mailing Address:** 

4401 EAST 10TH AVE HIALEAH, FL 33013 US

FEI Number: 88-1445867 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SUN, PENG 4401 EAST 10TH AVE HIALEAH, FL 33013 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

FILED Apr 12, 2024

**Secretary of State** 

2759076530CC

## Authorized Person(s) Detail:

Title MGR

Name SUN, PENG

Address 4401 EAST 10TH AVE City-State-Zip: HIALEAH FL 33013

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: PENG SUN MANAGER 04/12/2024