

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000135497

**Entity Name:** US PHARMA DYNAMICS, LLC

**Current Principal Place of Business:**

300 SUNNY ISLES BLVD.  
1130  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

300 SUNNY ISLES BOULEVARD  
1103  
SUNNY ISLES BEACH, FL 33160 UN

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

VAUGHN, JEFFREY C  
300 SUNNY ISLES BLVD.  
1103  
SUNNY ISLES BEACH, FL 33160 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 VAUGHN, JEFFREY C  
Address 300 SUNNY ISLES BOULEVARD,  
#1103  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title MGR  
Name PASIN, MITCHELL C  
Address 102 NE 2ND ST #345  
City-State-Zip: BOCA RATON FL 33432

*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:** JEFFREY C VAUGHN

**MANAGING MEMBER**

**01/30/2023**

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

\_\_\_\_\_  
Date