

**2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L22000356540

**Entity Name:** DROPS SPECIALIST LLC

**Current Principal Place of Business:**

16902 HANNA RD  
LUTZ, FL 33549

**Current Mailing Address:**

16902 HANNA RD  
LUTZ, FL 33549 US

**FEI Number:** 88-8294933

**Certificate of Status Desired:** No

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

PAIN, AMADELIS  
16902 HANNA RD  
LUTZ, FL 33549 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            PRESIDENT  
Name            PAIN, AMADELIS  
Address        16902 HANNA RD  
City-State-Zip: LUTZ FL 33549

Title            VP  
Name            DIAZ, CARLOS  
Address        16902 HANNA RD  
City-State-Zip: LUTZ FL 33549

Title            AMBR  
Name            DIAZ, DEREK  
Address        16902 HANNA RD  
City-State-Zip: LUTZ FL 33549

*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:** CARLOS DIAZ

AMBR

08/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date