

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000443273

Entity Name: RESPIRATORY EXAMPREP LLC

Current Principal Place of Business:

112 THOMAS RD
WEST PARK FL, AL 33023

Current Mailing Address:

112 THOMAS RD
WEST PARK FL, FL 33023 US

FEI Number: 92-1225014

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOB, CHARLES
112 THOMAS RD
WEST PARK FL, FL 33023 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 MANAGER
Name CHARLES, BOB
Address 112 THOMAS RD
City-State-Zip: WEST PARK FL AL 33023

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: BOB CHARLES

MANAGER

02/08/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date