

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000518158

Entity Name: PROLAB SOLUTIONS LLC

Current Principal Place of Business:

4130 SALISBURY RD #2200
JACKSONVILLE, FL 32216

Current Mailing Address:

4130 SALISBURY RD #2200
JACKSONVILLE, FL 32216 US

FEI Number: 86-1966108

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSON, JAIME
4130 SALISBURY RD #2200
JACKSONVILLE, FL 32216 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 JOHNSON, JAIME
Address 4130 SALISBURY RD #2200
City-State-Zip: JACKSONVILLE FL 32216

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: JAIME JOHNSON

MGR

01/28/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date