

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000001537

Entity Name: PRESCRIPTION CARE MANAGEMENT, LLC

Current Principal Place of Business:

4790 CAUGHLIN PKWY. #396
RENO, NV 89519

Current Mailing Address:

PO BOX 34446
RENO, NV 89533 US

FEI Number: 27-3463867

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RICHARD E. COATES/COATES LAW FIRM, PL
115 EAST PARK AVENUE
NUMBER 1
TALLAHASSEE, FL 32301 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 D'ANTONI, GARRET
Address P.O. BOX 34446
City-State-Zip: RENO NV 89533-4446

Title AP
Name MCCLARY, PAM
Address P.O. BOX 34446
City-State-Zip: RENO NV 89533-4446

Title MGR
Name WENER, KENNETH
Address P.O. BOX 34446
City-State-Zip: RENO NV 89533-4446

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: MCCLARY, PAM

ACCOUNTING MANAGER 04/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date