

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M21000006357

Entity Name: OPTIMUM MEDICAL, LLC

Current Principal Place of Business:

12442 SW 119 CT.
MIAMI, FL 33186

Current Mailing Address:

12442 SW 119 CT.
MIAMI, FL 33186 US

FEI Number: 86-3926183

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALFREDO GARCIA-MENICAL, P.A.
4937 SW 74TH COURT SUITE 3
MIAMI, FL 33155 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 MARIELA, JANE
Address 12442 SW 119 CT.
City-State-Zip: MIAMI FL 33186

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: MARIELA JANE

MANAGER

04/27/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date