PORT ST LL	JCIE, FL 34953 US			
FEI Number: 03-0463804			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
EUGENE, JEAN 1362 BAYSHOI PORT ST LUCI				
The above named	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of F	lorida.
	d entity submits this statement for the purpose of changing its regise: E: EUGENE JEAN-MARIE G.	stered office or regis	tered agent, or both, in the State of F	lorida. 03/26/2021
	-	stered office or regis	tered agent, or both, in the State of F	
SIGNATURE	EUGENE JEAN-MARIE G.	stered office or regis	tered agent, or both, in the State of F	03/26/2021
SIGNATURE	EUGENE JEAN-MARIE G. Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of F	03/26/2021
SIGNATURE Authorized	EUGENE JEAN-MARIE G. Electronic Signature of Registered Agent Person(s) Detail :			03/26/2021
SIGNATURE Authorized	E: EUGENE JEAN-MARIE G. Electronic Signature of Registered Agent Person(s) Detail : MGR	Title	MGR	03/26/2021

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0200009103

Entity Name: GREMA MEDICAL SERVICES, LLC

Current Principal Place of Business:

1362 BAYSHORE BLVD PORT ST LUCIE, FL 34953

Current Mailing Address:

1362 BAYSHORE BLVD

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: JEAN-MARIE G EUGENE

MGR

03/26/2021 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 26, 2021 **Secretary of State** 9464266992CC