

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000012961

Entity Name: GALE HEALTHCARE SOLUTIONS - FLORIDA, LLC

Current Principal Place of Business:

4111 METRIC DRIVE
WINTER PARK, FL 32792

Current Mailing Address:

4111 METRIC DRIVE
WINTER PARK, FL 32792 US

FEI Number: 32-0109485

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCorp SERVICES, INC.
3458 LAKESHORE DRIVE
TALLAHASSEE, FL 32312 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 BRASWELL, JAMES
Address 4111 METRIC DRIVE
City-State-Zip: WINTER PARK FL 32792

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: JAMES BRASWELL

MGR

02/26/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date