

**2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000073578

**FILED**  
**Feb 17, 2026**  
**Secretary of State**  
**7844678954CC**

**Entity Name:** QUOTIENT SCIENCES LABS, LLC

**Current Principal Place of Business:**

3898 NW 7TH STREET  
MIAMI, FL 33134

**Current Mailing Address:**

3898 NW 7TH STREET  
MIAMI, FL 33134 US

**FEI Number:** 26-3120255

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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           MANAGER  
Name           GLASS, DESMOND  
Address        3898 NW 7TH STREET  
City-State-Zip: MIAMI FL 33126

Title           MANA  
Name           SMITH, HARPREET  
Address        ATT: HARPREET SMITH  
City-State-Zip: MIAMI FL 33126

Title           MR  
Name           LEUENBERGER, MARLENE  
Address        3898 NW 7TH STREET  
City-State-Zip: MIAMI FL 33134

*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:** HARPREET SMITH

MANA

02/17/2026

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date