2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2024
Secretary of State
2910880637CC

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Entity Name: OPTIMUM MEDICAL DESIGN, LLC

Current Principal Place of Business:

250 CATALONIA AVE SUITE 600
CORAL GABLES, FL 33134

Current Mailing Address:

250 CATALONIA AVE SUITE 600
CORAL GABLES, FL 33134 US

FEI Number: 81-1416750

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERNANDEZ, DANIEL
250 CATALONIA AVENUE
SUITE 600
CORAL GABLES, FL 33134 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: DANIEL FERNANDEZ 05/01/2024

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	CADET, CARLOS M	Name	RAGGIO, CLAUDIA
Address	250 CATALONIA AVE SUITE 600	Address	250 CATALONIA AVE SUITE 600
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES 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: CADET , CARLOS M MANAGER 05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date