

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000060634

Entity Name: PHENOGEN, LLC

Current Principal Place of Business:

4400 BISCAYNE BLVD
1200-N
MIAMI, FL 33137

Current Mailing Address:

4400 BISCAYNE BLVD
1200-N
MIAMI, FL 33137 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 AUTHORIZED MEMBER
Name OPKO HEALTH, INC.
Address 4400 BISCAYNE BLVD
1200-N
City-State-Zip: MIAMI FL 33137

Title SECRETARY
Name GREEN, CAMIELLE
Address 481 EDWARD H ROSS DR
City-State-Zip: ELMWOOD PARK NJ 07407

Title AUTHORIZED REPRESENTATIVE,
TREASURER
Name LOGAL, ADAM
Address 481 EDWARD H ROSS DR
City-State-Zip: ELMWOOD PARK NJ 07407

Title PRESIDENT, ASST. SECRETARY
Name RUBIN, STEVEN D.
Address 481 EDWARD H ROSS DR
City-State-Zip: ELMWOOD PARK NJ 07407

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: ADAM LOGAL

**AUTHORIZED
REPRESENTATIVE,**

04/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date