

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000071951

Entity Name: SIGMA SCIENTIFIC LLC**Current Principal Place of Business:**12109 SOUTH US HIGHWAY 441
MICANOPY, FL 32667**Current Mailing Address:**12109 SOUTH US HIGHWAY 441
MICANOPY, FL 32667**FEI Number:** 46-2881037**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ESTAVER, JAMES BURKE II
12109 SOUTH US HIGHWAY 441
MICANOPY, FL 32667 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:** JAMES ESTAVER

04/27/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED MEMBER
Name MAYS, DAVE DR.
Address 13703 MILLHOPPER ROAD
City-State-Zip: GAINESVILLE FL 32653

Title MANAGER
Name ESTAVER, JAMES B
Address 6434 SW 84TH TER.
City-State-Zip: GAINESVILLE FL 32608

Title AUTHORIZED MEMBER
Name WEINSTEIN, NEIL DR.
Address 3301 SW 13 ST.
APT: 339Y
City-State-Zip: GAINESVILLE FL 32608

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 B. ESTAVER

MANAGER

04/27/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date