

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000142930

Entity Name: FLEX MEDICAL CENTERS, LLC

Current Principal Place of Business:

1501 PRESIDENTIAL WAY
SUITE 17
WEST PALM BEACH, FL 33401

Current Mailing Address:

3347 S SR 7
SUITE 202
WELLINGTON, FL 33449 US

FEI Number: 46-4045913

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRUNO, JOHN C DR.
125 S STATE ROAD 7
SUITE 104-274
WELLINGTON, FL 33414 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 MGRM
Name GONZALEZ BRUNO, ELIZABETH L DR.
Address 125 S STATE ROAD 7
SUITE 104-274
City-State-Zip: WELLINGTON FL 33414

Title MGRM
Name BRUNO, JOHN C DR.
Address 125 S STATE ROAD 7
SUITE 104-274
City-State-Zip: WELLINGTON FL 33414

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: ELIZABETH GONZALEZ BRUNO

OWNER/OPERATOR

04/23/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date