

2025 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L14000026555

Entity Name: HEALTHCARE SOLUTIONS DIRECT, LLC

Current Principal Place of Business:

10008 NORTH DALE MABRY
HWY STE 200
TAMPA, FL 33618

Current Mailing Address:

10008 NORTH DALE MABRY
HWY STE 200
TAMPA, FL 33618 US

FEI Number: 47-2613636

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GURBIKIAN, GREGORY L
10008 NORTH DALE MABRY
HWY STE 200
TAMPA, FL 33618 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: GREGORY L GURBIKIAN

04/23/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name GURBIKIAN, GREGORY L
Address 10008 NORTH DALE MABRY
HWY STE 200
City-State-Zip: TAMPA FL 33618

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: ALBERTO RODRIGUEZ

AR

04/23/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date