

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000086335

Entity Name: MD 2.0 LLC

Current Principal Place of Business:

1094 MILITARY TRL 2ND FLOOR
JUPITER, FL 33458

Current Mailing Address:

1785 NORTHPOINTE PKWY., SUITE 300
LUTZ, FL 33558 US

FEI Number: 47-1693155

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUBARSKY, AMIR
156 GULFSTREAM DRIVE
JUPITER, FL 33469 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: AMIR LUBARSKY

01/05/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title: MANAGER
Name: FLORIDA ELITE MANAGEMENT LLC
Address: 1785 NORTHPOINTE PKWY., SUITE 300
City-State-Zip: LUTZ FL 33558

Title: AUTHORIZED REPRESENTATIVE, CEO, PRESIDENT
Name: SHRESTHA, RAJ
Address: 1785 NORTHPOINTE PKWY., SUITE 300
City-State-Zip: LUTZ FL 33558

Title: AUTHORIZED REPRESENTATIVE, TREASURER
Name: HOLOHAN, MICHAEL
Address: 1785 NORTHPOINTE PKWY., SUITE 300
City-State-Zip: LUTZ FL 33558

Title: AUTHORIZED REPRESENTATIVE, SECRETARY
Name: RICHARDSON, CHRISTOPHER
Address: 1785 NORTHPOINTE PKWY., SUITE 300
City-State-Zip: LUTZ FL 33558

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: CHRISTOPHER RICHARDSON

AUTHORIZED REPRESENTATIVE

01/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date