2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2025
Secretary of State
0739291168CC

DOCUMENT# L15000085075

Entity Name: JAS MEDICAL, LLC

Current Principal Place of Business:

8438 BLUE COVE WAY
PARKLAND, FL 33076

Current Mailing Address:

8438 BLUE COVE WAY
PARKLAND, FL 33076 US

FEI Number: 47-4022934

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202 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	AMBR
Name	DORFMAN, ANDREW
Address	8438 BLUE COVE WAY
City-State-Zip:	PARKLAND FL 33076

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: ANDREW DORFMAN 04/07/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date