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: GIAN TROCHE MGR 04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000062214

Entity Name: UNIVERSAL AXON CLINICAL RESEARCH, LLC

Current Principal Place of Business:

3650 NW 82ND AVE. 503 DORAL, FL 33166

Current Mailing Address:

3650 NW 82ND AVE. 503 DORAL, FL 33166

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

TROCHE, GIAN 3650 NW 82ND AVE 503 DORAL, FL 33166 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

Authorized Person(s) Detail :

Title	MGR	Title	MGR	
Name	PANTHEON HOLDINGS, LLC	Name	A PRESTIGE WELLNESS CENTER,	
Address	3650 NW 82ND AVE. 405	Address	P.A. 3650 NW 82ND AVE.	
City-State-Zip:	DORAL FL 33166	City-State-Zip:	503 DORAL FL 33166	

Certificate of Status Desired: No

FILED Apr 29, 2024 Secretary of State 4064461501CC

Date

Date