

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000069138

**Entity Name:** INMUHEALTH GROUP LLC

**Current Principal Place of Business:**

9485 SW 72ND ST STE A295  
MIAMI, FL 33173-5414

**Current Mailing Address:**

9485 SW 72ND ST STE A295  
MIAMI, FL 33173-5414 US

**FEI Number:** 82-1265394

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

VEGA, NATALIA  
9485 SW 72ND ST STE A295  
MIAMI, FL 33173-5414 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:** NATALIA VEGA

02/14/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name QUINTANA, DANILO  
Address 9485 SW 72ND ST STE A295  
City-State-Zip: MIAMI FL 33173-5414

Title MGR  
Name VEGA , NATALIA  
Address 9485 SW 72ND ST STE A295  
City-State-Zip: MIAMI FL 33173-5414

*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:** NATALIA VEGA

MGR

02/14/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date