## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000074865

Entity Name: KAGAN-MED, LLC

**Current Principal Place of Business:** 

18741 SOUTH RIVER ROAD ALVA. FL 33920

**Current Mailing Address:** 

18741 SOUTH RIVER ROAD ALVA, FL 33920 US

FEI Number: 82-1040986 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAGAN, ABBOTT 18741 SOUTH RIVER ROAD ALVA, FL 33920 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: ABBOTT KAGAN II 02/10/2021

Electronic Signature of Registered Agent

Date

FILED Feb 10, 2021

**Secretary of State** 

4508429788CC

Authorized Person(s) Detail:

Title MGR Title AMBR

Name KAGAN, ABBOTT II Name KAGAN, SHEILA

Address 18741 SOUTH RIVER ROAD Address 18741 SOUTH RIVER ROAD

City-State-Zip: ALVA FL 33920 City-State-Zip: ALVA FL 33920

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: ABBOTT KAGAN II MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

02/10/2021 Date