

**2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L17000103525

**Entity Name:** MED PM SERVICES LLC

**Current Principal Place of Business:**

15757 PINES BLVD  
245  
PEMBROKE PINES, FL 33027

**Current Mailing Address:**

15757 PINES BLVD  
245  
PEMBROKE PINES, FL 33027 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

LEON, ELIESER  
15757 PINES BLVD  
212  
PEMBROKE PINES, FL 33027 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:** ELIESER LEON

06/06/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LEON, ELIESER  
Address 15757 PINES BLVD  
City-State-Zip: PEMBROKE PINES FL 33027

*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:** ELIESER LEON

MGR

06/06/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date