

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000018674

Entity Name: MEDY ISR LLC

Current Principal Place of Business:

6900 PHILIPS HWY
SUITE 26/27
JACKSONVILLE, FL 32216

Current Mailing Address:

9 HATEENA
C/O WELICKER-POLLAK , MIRIAM APT. 73
NESHER, 3686409 IL

FEI Number: 32-0553839

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH ST N, STE 300
ST.PETERSBURG, FL 33702 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: MIRIAM POLEK

01/31/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name WELICKER-POLLAK, MIRIAM
Address 9 HATEENA
APT. 73
City-State-Zip: NESHER 3686409

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: MIRIAM WELICKER-POLLAK

MANAGER

01/31/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date