

2021 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:

6900 PHILLIPS HWAY
SUITE 26
JACKSONVILLE, FL 32216 US

FEI Number: 32-0553839

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PANDO, OR
6900 PHILIPS HWY
SUITE 26/27
JACKSONVILLE, FL 32216 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

Date

Authorized Person(s) Detail :

Title AMBR
Name WELICKER-POLLAK, MIRIAM
Address 20 RAOUL WALLENBERG APT 7
City-State-Zip: HAIFA IS 34990

Title AMBR
Name POLLAK, MEIR ALBERTO
Address 20 RAOUL WALLENBERG APT 7
City-State-Zip: HAIFA IS 34990

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: WELICKER-POLLAK , MIRIAM

OWNER

01/12/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date