

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000078116

Entity Name: THE LKC PHARM LLC

Current Principal Place of Business:

820 9TH AVE S
JACKSONVILLE BEACH , FL 32250

Current Mailing Address:

820 9TH AVE S
JACKSONVILLE BEACH , FL 32250 US

FEI Number: 83-0614326

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, LARONNE II
820 9TH AVE S
JACKSONVILLE BEACH , FL 32250 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 MGR
Name WILLIAMS, LARONNE II
Address 820 9TH AVE S
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title MGR
Name WILLIAMS, KANDRA
Address 820 9TH AVE S
City-State-Zip: JACKSONVILLE BEACH FL 32250

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: KANDRA WILLIAMS

MGR

02/13/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date