

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000108861

Entity Name: CURELOGICS WOUND CARE AND HYPERBARIC L.L.C.

Current Principal Place of Business:

809 HIGHWAY 466
SUITE 201-C
LADY LAKE, FL 32159

Current Mailing Address:

809 HIGHWAY 466
SUITE 201-C
LADY LAKE, FL 32159 US

FEI Number: 82-5475099

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARDIAC AND VASCULAR CONSULTANTS M.D., P.A.
1050 OLD CAMP ROAD
THE VILLAGES, FL 32162 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 CARDIAC AND VASCULAR
CONSULTANTS M.D., P.A.
Address 1050 OLD CAMP ROAD
City-State-Zip: THE VILLAGES FL 32162

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: SHRIKANTH UPADYA

OFFICER

04/28/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date