

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000131776

Entity Name: PALM MEDICAL, LLC

Current Principal Place of Business:

15495 EAGLE NEST LANE
SUITE 130
MIAMI LAKES, FL 33014

Current Mailing Address:

15495 EAGLE NEST LANE
SUITE 130
MIAMI LAKES, FL 33014 US

FEI Number: 84-1882863

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORTHWEST REGISTERED AGENT LLC
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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title AMBR
Name ZAHARAN, NASIM
Address 15495 EAGLE NEST LANE
 SUITE 130
City-State-Zip: MIAMI LAKES FL 33014

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: NASIM ZAHARAN

MANAGER

01/03/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date