2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000160365

Entity Name: IMA OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

1601 CLINT MOORE ROAD, SUITE 115

BOCA RATON, FL 33487

Current Mailing Address:

1601 CLINT MOORE ROAD, SUITE 115 BOCA RATON, FL 33487 US

FEI Number: 65-1061541 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GROSS, JEFFREY 1601 CLINT MOORE ROAD, SUITE 115 BOCA RATON, FL 33487 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

FILED Jan 16, 2025

Secretary of State

2249921055CC

Authorized Person(s) Detail:

Title MANAGER Title MANAGER

Name GROSS, JEFFREY Name COHEN, MEYER

Address 1601 CLINT MOORE ROAD, SUITE 115 Address 1601 CLINT MOORE ROAD, SUITE 115

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title MANAGER Title MANAGER

Name SLOTNICK, DAVID L M.D. Name LEHMANN, ANDREW C

Address 1601 CLINT MOORE ROAD, SUITE 115 Address 1601 CLINT MOORE ROAD

115

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title MANAGER Title MANAGER

Name ANGELILLO, MICHAEL C Name ROSENBERG, MARC

Address 1601 CLINT MOORE ROAD, SUITE 115 Address 1601 CLINT MOORE ROAD, SUITE 115

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title MANAGER Title MANAGER

Name LEVINE, SARA Name MORAES, BRIAN

Address 1601 CLINT MOORE ROAD, SUITE 115 Address 1601 CLINT MOORE ROAD, SUITE 115

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

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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: JEFFREY D GROSS MANAGER 01/16/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title MANAGER Title MANAGER

Name PICKHOLTZ, DOV Name SPIRAZZA, CARL

1601 CLINT MOORE ROAD, SUITE 115 Address 1601 CLINT MOORE ROAD, SUITE 115 Address

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title MANAGER

Name CHRZAN, DOMINIK Name

BURKE, MICHAEL Address 1601 CLINT MOORE ROAD, SUITE 115

Address 1601 CLINT MOORE ROAD, SUITE 115 City-State-Zip: BOCA RATON FL 33487

Title

MANAGER

City-State-Zip: BOCA RATON FL 33487