

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000204700

Entity Name: MEDLUXE LLC

Current Principal Place of Business:

111 NORTH ORANGE AVENUE
SUITE 800-265
ORLANDO, FL 32801

Current Mailing Address:

PO BOX 9403
WINTER HAVEN, FL 33883 US

FEI Number: 84-2751058

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC
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: DAVID ROBERTS

02/07/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGING MEMBER
Name CUYLER, LATOYA S
Address PO BOX 9403
City-State-Zip: WINTER HAVEN FL 33883

Title OFFICER
Name ROBERTS, DAVID
Address 7901 4TH ST N
 STE 300
City-State-Zip: ST. PETERSBURG FL 33702

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: LATOYA CUYLER

MANAGING MEMBER

02/07/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date