## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000220835

Entity Name: ASD PRECISION MEDICINE LLC

**Current Principal Place of Business:** 

4520 CELESTIAL DRIVE GRANT, FL 32949

GRANT, FL 32949

4520 CELESTIAL DRIVE GRANT. FL 32949

**Current Mailing Address:** 

FEI Number: 85-0972059 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RIVIERE, JOSEPHINE 4520 CELESTIAL DRIVE GRANT, FL 32949 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 Apr 05, 2023

**Secretary of State** 

4811693944CC

## Authorized Person(s) Detail:

Title MGR

Name STONESTREET, RONDA
Address 760 BARBERRY DRIVE
City-State-Zip: ALPHARETTA GA 30004

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: RONDA STYLES STONESTREET

**MGR** 

04/05/2023