2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2025
Secretary of State
2865080344CC

DOCUMENT# L20000096864

Entity Name: JAZALKAHEALTH LLC

Current Principal Place of Business:

560 VILLAGE BLVD
#250
WEST PALM BEACH, FL 33062

Current Mailing Address:

4689 CASPIAN WAY
DAVIE, FL 33314 US

FEI Number: 85-0667911

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS CARD
1600 S FEDERAL HWY
941
POMPANO BEACH, FL 33062 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: STEPHEN M ZALKA 04/27/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	ZALKA, JACOB A
Address	4689 CASPIAN WAY
City-State-Zip:	DAVIE FL 33314

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: JACOB ZALKA MGRM 04/27/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date