

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000197130

Entity Name: PAIN RELIEF HOLDING LLC

Current Principal Place of Business:

1500 NORTH UNIVERSITY DR., UNIT 101
CORAL SPRINGS, FL 33071

Current Mailing Address:

1500 NORTH UNIVERSITY DR., UNIT 101
CORAL SPRINGS, FL 33071 US

FEI Number: 85-1863406

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FARMER, GARY
1395 BRICKELL AVENUE
SUITE 800
MIAMI, FL 33131 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: GARY FARMER

04/28/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name AMIN, NEEL H
Address 1500 NORTH UNIVERSITY DR., UNIT
101
City-State-Zip: CORAL SPRINGS FL 33071

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: NEEL H AMIN

04/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date