

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000238172

**Entity Name:** REYNA MEDICAL SERVICES LLC

**Current Principal Place of Business:**

61 GRAND CANAL DRIVE  
200  
MIAMI, FL 33144

**Current Mailing Address:**

8545 NW 166 TERRACE  
MIAMI LAKES, FL 33016

**FEI Number:** 85-2577232

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REYNA LOPEZ, REBECA  
61 GRAND CANAL DRIVE  
200  
MIAMI, FL 33144 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

**Authorized Person(s) Detail :**

Title MGR  
Name REYNA LOPEZ, REBECA  
Address 8545 NW 166 TERRACE  
City-State-Zip: MIAMI LAKES FL 33016

*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:** REBECA REYNA LOPEZ

**PRESIDENT**

**02/28/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date