

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000396801

**Entity Name:** GRACEPHARM LLC

**Current Principal Place of Business:**

1231 ALPINE LAKE DRIVE  
BRANDON, FL 33511

**Current Mailing Address:**

1231 ALPINE LAKE DRIVE  
BRANDON, FL 33511 US

**FEI Number:** 85-4361314

**Certificate of Status Desired:** No

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

I & R TAX SERVICES INC  
4523 SUGARTREE DRIVE W  
LAKELAND, FL 33813 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           | P                      | Title           | MANAGER MEMBER         |
| Name            | ADETULA, DORCAS D      | Name            | ADETULA, OLADAPO B     |
| Address         | 1231 ALPINE LAKE DRIVE | Address         | 1231 ALPINE LAKE DRIVE |
| City-State-Zip: | BRANDON FL 33511       | City-State-Zip: | BRANDON FL 33511       |

*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:** OLADAPO B ADETULA

P

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date