## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000291945

Entity Name: IV REJUVENATION THERAPY LLC

**Current Principal Place of Business:** 

4872 SW 140TH AVE MIAMI, FL 33175

**Current Mailing Address:** 

4872 SW 140TH AVE MIAMI, FL 33175 US

FEI Number: 87-1448320 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ TELLERIA, PAVEL M 4872 SW 140TH AVE MIAMI, FL 33175 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: PAVEL M LOPEZ TELLERIA 03/05/2024

Electronic Signature of Registered Agent

Date

FILED Mar 05, 2024

**Secretary of State** 

5238217844CC

Authorized Person(s) Detail:

Title AMBR Title MGR

NameLOPEZ TELLERIA, PAVEL MNameGARCIA LUIS, MAITTEAddress4872 SW 140TH AVEAddress4872 SW 140TH AVECity-State-Zip:MIAMI FL 33175City-State-Zip:MIAMI FL 33175

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: PAVEL M LOPEZ TELLERIA

**AMBR** 

03/05/2024