

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000345330

Entity Name: SUNSHINE THERAPEUTIC SERVICES OF FLORIDA LLC

Current Principal Place of Business:

644 MEADOWBROOK DR
WINTER SPRINGS, FL 32708

Current Mailing Address:

644 MEADOWBROOK DR
WINTER SPRINGS, FL 32708 US

FEI Number: 87-1942510

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAZARUS, GABRIELA
644 MEADOWBROOK DR
WINTER SPRINGS, FL 32708 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: GABRIELA LAZARUS

02/14/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name LAZARUS, RICHARD
Address 644 MEADOWBROOK DR
City-State-Zip: WINTER SPRINGS FL 32708

Title MGR
Name LAZARUS, GABRIELA
Address 644 MEADOWBROOK DR
City-State-Zip: WINTER SPRINGS FL 32708

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: LAZARUS, GABRIELA

MGR

02/14/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date