

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000353736

**Entity Name:** MEDARRIVE FLORIDA LLC

**Current Principal Place of Business:**

400 E. ROYAL LANE, BUILDING 3  
SUITE 290  
IRVING, TX 75093

**Current Mailing Address:**

400 E. ROYAL LANE, BUILDING 3  
SUITE 290  
IRVING, TX 75093 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

VCORP SERVICES, LLC  
1200 S PINE ISLAND ROAD  
PLANTATION, FL 33324 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            AUTHORIZED MEMBER  
Name            PLUMB, INNA  
Address        400 E. ROYAL LANE, BUILDING 3  
                  SUITE 290  
City-State-Zip: IRVING TX 75093

*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:** PLUMB , INNA

**AUTHORIZED MEMBER**

**04/21/2022**

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

\_\_\_\_\_ Date