

2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L21000508582

Entity Name: INNOVATION MEDICAL CENTER, LLC

Current Principal Place of Business:

50 NE 26TH AVE
SUITE 310
POMPANO BEACH, FL 33062

Current Mailing Address:

50 NE 26TH AVE
SUITE 310
POMPANO BEACH, FL 33062 US

FEI Number: 87-3827381

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DUQUE, JOHN
50 NE 26TH AVE
SUITE 310
POMPANO BEACH, FL 33062 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: JOHN DUQUE

03/29/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name THE TELEMEDICINE WELLNESS CONNECTION, LLC
Address 16192 COASTAL HIGHWAY
City-State-Zip: LEWES DE 19958

Title MANAGER
Name DUQUE, JOHN
Address 50 NE 26TH AVE SUITE 310
City-State-Zip: POMPANO BEACH FL 33062

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: JOHN DUQUE

MANAGER

03/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date