

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000283977

Entity Name: VIDA PLUS MEDICAL, LLC

Current Principal Place of Business:

339 CYPRESS PARKWAY
SUITE 250
KISSIMMEE, FL 34759

Current Mailing Address:

3105 CRISPIN CIR
SAINT CLOUD, FL 34773 US

FEI Number: 88-2920111

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NIEVES HERNANDEZ, EDWIN J
3105 CRISPIN CIR
SAINT CLOUD, FL 34773 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 AMBR
Name NIEVES HERNANDEZ, EDWIN J
Address 3105 CRISPIN CIR
City-State-Zip: SAINT CLOUD FL 34773

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: EDWIN J NIEVES HERNANDEZ

DR

01/19/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date