

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000301814

Entity Name: UTHRAT HEALTHCARE SOLUTIONS LLC

Current Principal Place of Business:

11582 SW VILLAGE PKWY
#1016
PORT SAINT LUCIE, FL 34987

Current Mailing Address:

11582 SW VILLAGE PKWY
#1016
PORT SAINT LUCIE, FL 34987 US

FEI Number: 30-1317588

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DENMARK, JILLIAN
10 SE CENTRAL PARKWAY
SUITE 100
STUART, FL 34994 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: JILLIAN DENMARK

03/29/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name PALANIVELU, MANOJKUMAR
Address 11582 SW VILLAGE PKWY, #1016
City-State-Zip: PORT SAINT LUCIE FL 34987

Title MGR
Name PALANIVELU, NERANJANA
Address 11582 SW VILLAGE PKWY, #1016
City-State-Zip: PORT SAINT LUCIE FL 34987

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: PALANIVELU, MANOJKUMAR

MGR

03/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date