

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000324002

Entity Name: SATTVA MEDICINE PLLC

Current Principal Place of Business:

2121 BISCAYNE BLVD #1255
MIAMI, FL 33137

Current Mailing Address:

2121 BISCAYNE BLVD #1255
MIAMI, FL 33137 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEGALINC CORPORATE SERVICES INC.
476 RIVERSIDE AVE
JACKSONVILLE, FL 32202 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 MATHAI, DAVID
Address 11810 NE 19TH DRIVE, APT. 2
City-State-Zip: NORTH MIAMI FL 33181

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: DAVID MATHAI

MEMBER

03/28/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date