2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 18, 2025
Secretary of State
4182987959CC

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Entity Name: NEPHRON WELLNESS LLC

Current Principal Place of Business:

487 SADDLEBROOK LANE
NAPLES, FL 34110

Current Mailing Address:

487 SADDLEBROOK LANE
NAPLES, FL 34110

FEI Number: 99-0659705

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RUSSO, MARK S MD, PHD
487 SADDLEBROOK LANE
NAPLES, FL 34110 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: MARK S RUSSO, MD, PHD 02/18/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	RUSSO, MARK S MD,PHD	Name	STRICEVIC, VERA MD
Address	487 SADDLEBROOK LANE	Address	487 SADDLEBROOK LANE
City-State-Zip:	NAPLES FL 34110	City-State-Zip:	NAPLES FL 34110

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: MARK S. RUSSO, MD, PHD MEMBER 02/18/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date