## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000025436

Entity Name: IATROS IAOMAI, LLC

**Current Principal Place of Business:** 

3126 NORTHWEST 43RD STREET GAINESVILLE, FL 32606

**Current Mailing Address:** 

15368 WILLOW RIDGE DRIVE MONTEVERDE, FL 34756 US

FEI Number: 33-4707982 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRUZ, CONCEPCION 15368 WILLOW RIDGE DRIVE MONTEVERDE, FL 34756 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

FILED Apr 22, 2025

**Secretary of State** 

2919784830CC

## Authorized Person(s) Detail:

Title AR

Name CRUZ, MARIAH C DO Address 3126 NW 43RD ST

City-State-Zip: GAINESVILLE FL 32606

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: MARIAH CRUZ

AUTHORIZED REPRESENTATIVE 04/22/2025