

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000254080

Entity Name: K.A.C MED HEALTH LLC

Current Principal Place of Business:

750 SE 4TH ST
HIALEAH, FL 33010

Current Mailing Address:

750 SE 4TH ST
HIALEAH, FL 33010

FEI Number: 99-3805644

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARMAS, KARINA
750 SE 4TH ST
HIALEAH, FL 33010 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 MGR
Name ARMAS, KARINA
Address 750 SE 4TH ST
City-State-Zip: HIALEAH FL 33010

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: ARMAS KARINA

MGR

03/17/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date