

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000279428

**Entity Name:** XL DRUG TESTING LLC

**Current Principal Place of Business:**

7902 SAGEBRUSH PL  
ORLANDO, FL 32822

**Current Mailing Address:**

7902 SAGEBRUSH PL  
ORLANDO, FL 32822 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ROSS, XAVIER L  
7902 SAGEBRUSH PL  
ORLANDO, FL 32822 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	Title	MGR
Name	MAY, XORINA L	Name	ROSS, XAVIER L
Address	26 LINCOLN BLVD	Address	7902 SAGEBRUSH PL
City-State-Zip:	ORLANDO FL 32810	City-State-Zip:	ORLANDO FL 32822

*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:** XAVIER L ROSS

MNG

03/21/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date