2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2025
Secretary of State
9276212957CC

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Entity Name: UNLIMITED MEDICAL REVENUE SERVICES, LLC

Current Principal Place of Business:

6586 HYPOLUXO RD. PMB #112
LAKE WORTH, FL 33467

Current Mailing Address:

6586 HYPOLUXO RD. PMB #112
LAKE WORTH, FL 33467 US

FEI Number: 99-4612537

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FARBER, EVAN J
5765 MONTERRA CLUB DRIVE
LAKE WORTH, FL 33463 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	AR	Title	AMBR
Name	FARBER, LEAH	Name	FARBER, EVAN
Address	5765 MONTERRA CLUB DRIVE	Address	5765 MONTERRA CLUB DRIVE
City-State-Zip:	LAKE WORTH FL 33463	City-State-Zip:	LAKE WORTH FL 33463

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: EVAN J FARBER AUTHORIZED MEMBER 04/29/2025

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