

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000472448

Entity Name: RED FOX MEDICAL LLC

Current Principal Place of Business:

12369 SW CRYSTAL COVE DRIVE
PORT SAINT LUCIE, FL 34987

Current Mailing Address:

12369 SW CRYSTAL COVE DRIVE
PORT SAINT LUCIE, FL 34987 US

FEI Number: 33-1905839

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUSTAVSON, KIERSTEN D
12369 CRYSTAL COVE DRIVE
PORT SAINT LUCIE, FL 34987 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 AMBR
Name GUSTAVSON, KIERSTEN D
Address 12369 CRYSTAL COVE DRIVE
City-State-Zip: PORT SAINT LUCIE FL 34987

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: KIERSTEN GUSTAVSON

MS.

04/20/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date