

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1800000551

**Entity Name:** HERAEUS MEDICAL LLC

**Current Principal Place of Business:**

770 TOWNSHIP LINE ROAD  
YARDLEY, PA 19067

**Current Mailing Address:**

770 TOWNSHIP LINE ROAD  
YARDLEY, PA 19067 US

**FEI Number: 82-2057343**

**Certificate of Status Desired: No**

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 MBR  
Name HERAEUS INCORPORATED  
Address 770 TOWNSHIP LINE RD, STE 300  
City-State-Zip: YARDLEY PA 19067

Title VICE PRESIDENT, SECRETARY  
Name ROZENFELD, YURI  
Address 770 TOWNSHIP LINE ROAD  
City-State-Zip: YARDLEY PA 19067

Title TREASURER  
Name PATEL, ASHOK  
Address 770 TOWNSHIP LINE RD, STE 300  
City-State-Zip: YARDLEY PA 19067

Title PRESIDENT  
Name CHILDERS, DEVIN  
Address 770 TOWNSHIP LINE ROAD  
City-State-Zip: YARDLEY PA 19067

*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: YURI ROZENFELD**

**VICE PRESIDENT**

**03/26/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date