

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000326278

Entity Name: RAINBOW PHARMACY, LLC

Current Principal Place of Business:

2820 NORTHEAST 214TH STREET
STORE #7
AVENTURA, FL 33180

Current Mailing Address:

3901 ISLAND ESTATE DRIVE
MIAMI, FL 33160 US

FEI Number: 88-3442879

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOYNE, STEVEN
151 NW 1ST STREET
DELRAY BEACH, FL 33444 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 MICHAEL, MICHAEL
Address 2820 NORTHEAST 214TH STREET,
 STORE #7
City-State-Zip: AVENTURA FL 33180

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: MICHAEL MICHAEL

MEMBER

02/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date