

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000004878

**Entity Name:** QUALITY HEALTH MANAGEMENT, LLC

**Current Principal Place of Business:**

7975 NW 154 STREET  
SUITE 302  
MIAMI LAKES, FL 33016

**Current Mailing Address:**

7975 NW 154 STREET  
SUITE 302  
MIAMI LAKES, FL 33016 US

**FEI Number:** 65-1003375

**Certificate of Status Desired:** Yes

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

ZIOMEK, PATRICIA  
7975 NW 154 STREET  
SUITE 302  
MIAMI LAKES, FL 33016 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:** PATRICIA ZIOMEK

02/05/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGING MEMBER	Title	MANAGING MEMBER
Name	ZIOMEK, PATRICIA	Name	SANCHEZ, BARBARA
Address	7975 NW 154 STREET SUITE 302	Address	7975 NW 154 STREET SUITE 302
City-State-Zip:	MIAMI LAKES FL 33016	City-State-Zip:	MIAMI LAKES FL 33016

*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:** PATRICIA ZIOMEK

MANAGING MEMBER

02/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date