

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000102152

Entity Name: NORTH DADE REHABILITATION CENTER L.L.C.

Current Principal Place of Business:

1390 NE 162 STREET
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

1390 NE 162 STREET
NORTH MIAMI BEACH, FL 33162 US

FEI Number: 20-5750386

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LIGER, GALLINA
1390 NE 162 STREET
NORTH MIAMI BEACH, FL 33162 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: GALLINA LIGER

04/30/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name LIGER, CHRISTOPHER
Address 1390 NE 162 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title AMBR
Name LIGER, PRESTON G
Address 1390 NE 162 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title MANAGING PARTNER
Name LIGER, GALLINA
Address 1390 NE 162 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title MANAGING PARTNER
Name LIGER, FLEURIDOR
Address 1390 NE 162 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33162

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: FLEURIDOR LIGER

MANAGING PARTNER

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date