#### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000125603

Entity Name: PROFESSIONAL DIALYSIS CENTER, LLC

FILED Feb 08, 2024 Secretary of State 3679497707CC

## **Current Principal Place of Business:**

10021 PINES BLVD., STE. 201 PEMBROKE PINES. FL 33024

## **Current Mailing Address:**

10021 PINES BLVD., STE. 201 PEMBROKE PINES. FL 33024 US

FEI Number: 27-4218019 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

THE GENESIS FIRM LLC 10021 PINES BLVD. PEMBROKE PINES, FL 33024 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: FELIX RANGEL 02/08/2024

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail:

Name

Title AMBR, AUTHORIZED

REPRESENTATIVE RANGEL, FELIX A

Address 10021 PINES BLVD., STE. 201
City-State-Zip: PEMBROKE PINES FL 33024

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: FELIX RANGEL PRESIDENT 02/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date