

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000115041

Entity Name: SUNSPIRE HEALTH FLORIDA, LLC**Current Principal Place of Business:**215 W. VERNE STREET
SUITE B
TAMPA, FL 33606**Current Mailing Address:**600 W. HILLSBORO BLVD
300
DEERFIELD BEACH, FL 33441 US**FEI Number:** 46-3424864**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HATTON, DAVID
2960 WENTWORTH
WESTON, FL 33332 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:** DAVID L. HATTON

02/14/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	MODIST, SCOTT
Address	600 W. HILLSBORO BLVD 300
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	MGR
Name	JONAS, GARRY
Address	600 W. HILLSBORO BLVD 300
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	MGR
Name	HATTON, DAVID
Address	600 W. HILLSBORO BLVD 300
City-State-Zip:	DEERFIELD BEACH FL 33441

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: SCOTT MODIST

MGR

02/14/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date