

**2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L16000077059

**Entity Name:** BEATING HEART HEALTH STAFFING, LLC

**Current Principal Place of Business:**

2815 HILLTOP LOOP  
APOPKA, FL 32712

**Current Mailing Address:**

1631 ROCK SPRINGS ROAD  
SUITE 312  
APOPKA, FL 32712 US

**FEI Number:** 81-2301206

**Certificate of Status Desired:** No

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

BAILEY, LASHONDA HORNSBY  
1631 ROCK SPRINGS ROAD  
SUITE 312  
APOPKA, FL 32712 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:** LASHONDA H. BAILEY

04/02/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER
Name	BAILEY, LASHONDA HORNSBY
Address	1631 ROCK SPRINGS ROAD SUITE 312
City-State-Zip:	APOPKA FL 32712
Title	MANAGER
Name	WILFRED A. BAILEY, II AND LASHONDA HORNSBY BAILEY, AS CO-TRUSTEES OF THE BAILEY FAMILY JOINT REVOCABLE TRUST DATED APRIL 2ND, 2024
Address	1631 ROCK SPRINGS ROAD SUITE 312
City-State-Zip:	APOPKA FL 32712

Title	MANAGER
Name	BAILEY II, WILFRED A
Address	1631 ROCK SPRINGS ROAD SUITE 312
City-State-Zip:	APOPKA FL 32712

*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:** LASHONDA HORNSBY BAILEY

**PRESIDENT**

04/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date