## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000086271

Entity Name: HEALTH PRO LLC

**Current Principal Place of Business:** 

8016 ATLANTIC BLVD JACKSONVILLE, FL 32211

**Current Mailing Address:** 

8016 ATLANTIC BLVD JACKSONVILLE, FL 32211 US

FEI Number: 81-2557247 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUTIERREZ, PEDRO A 3948 SARAH BROOKE CT JACKSONVILLE, FL 32277 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:

Name

Address

Electronic Signature of Registered Agent

Date

**FILED** Feb 09, 2023

**Secretary of State** 

6033066680CC

Authorized Person(s) Detail:

Title MGRM

GUTIERREZ, PEDRO A

3948 SARAH BROOKE CT

JACKSONVILLE FL 32277 City-State-Zip:

Title **MGRM** 

Address

Name PEREZ, JAVIER M

City-State-Zip: JACKSONVILLE FL 32218

12327 BRISTOL CREEK DR

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: PEDRO GUTIERREZ

**MGRM** 

02/09/2023