

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000042966

**Entity Name:** FLORIDA PHYSICIANS PSN, LLC

**Current Principal Place of Business:**

6000 SW 74TH ST.  
2ND FLOOR  
SOUTH MIAMI, FL 33143

**Current Mailing Address:**

6000 SW 74TH ST.  
2ND FLOOR  
SOUTH MIAMI, FL 33143 US

**FEI Number:** 83-1895962

**Certificate of Status Desired:** No

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

LOSEY PLLC  
1420 EDGEWATER DRIVE  
ORLANDO, FL 32804 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:** J. WILSON

03/01/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name FERNANDEZ, GEORGE M.  
Address 6000 SW 74TH ST.  
2ND FLOOR  
City-State-Zip: SOUTH MIAMI FL 33143

*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:** GEORGE FERNANDEZ

MGR

03/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date