### 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000165499

Entity Name: SHAMY LEGAL NURSE CONSULTANT, LLC

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

9075 WINTERHAVEN CIRCLE WELLINGTON, FL 33411

## **Current Mailing Address:**

9075 WINTERHAVEN CIRCLE WELLINGTON, FL 33411 US

## **FEI Number: APPLIED FOR**

# Name and Address of Current Registered Agent:

SHAMY, CYNDI 9075 WINTERHAVEN CR. WELLINGTON, FL 33411 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: CYNDI SHAMY

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title AMBR Name SHAMY, CYNDI Address 9075 WINTERHAVEN CIRCLE City-State-Zip: WELLINGTON FL 33411

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

FILED Apr 07, 2022 Secretary of State 8490933160CC

Certificate of Status Desired: No

04/07/2022 Date

04/07/2022

AMBR

Date