## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000236143

Entity Name: SPECIALTY NURSING SOLUTIONS, LLC

**Current Principal Place of Business:** 

240 S.W. 49 AVE MIAMI, FL 33134

**Current Mailing Address:** 

240 S.W. 49 AVE MIAMI, FL 33134

FEI Number: 82-3433231 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VICHOT, ADRIAN 240 S.W. 49 AVE MIAMI, FL 33134 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: ADRIAN VICHOT 05/01/2022

Electronic Signature of Registered Agent

Date

FILED May 01, 2022

**Secretary of State** 

9138593727CC

## Authorized Person(s) Detail:

Title AP

Name VICHOT, ADRIAN
Address 240 S.W. 49 AVE
City-State-Zip: MIAMI FL 33134

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: ADRIAN VICHOT AP 05/01/2022