

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000032873

**Entity Name:** AMN DORAL, LLC

**Current Principal Place of Business:**

3350 SW 148 AVENUE SUITE 110  
MIRAMAR, FL 33027

**Current Mailing Address:**

3350 SW 148 AVENUE SUITE 110  
MIRAMAR, FL 33027 US

**FEI Number:** 83-3595710

**Certificate of Status Desired:** No

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

MORIS & ASSOCIATES  
3650 NW 82ND AVE  
SUITE 401  
DORAL, FL 33166 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGR  
Name MORENO, ADOLFO  
Address 3350 SW 148 AVENUE SUITE 110  
City-State-Zip: MIRAMAR FL 33027

*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:** ADOLFO MORENO

**MANAGER**

**02/13/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date