# 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000042130

Entity Name: FAMILIAR MEDICAL CENTER, LLC.

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

777 E 25 ST STE 101 HIALEAH, FL 33013

# **Current Mailing Address:**

777 E 25 ST STE 101 HIALEAH, FL 33013 US

# FEI Number: 83-3645469

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

RODRIGUEZ, CARLOS M 777 E 25 ST STE 101 HIALEAH, FL 33013 US

-L 33013 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

### Authorized Person(s) Detail :

Title	MAMR	Title	MGRM
Name	RODRIGUEZ, CARLOS M	Name	JORGE DIAZ VALDES MD
Address	777 E 25 ST STE 101	Address	777 E 25 ST STE 101
City-State-Zip:	HIALEAH FL 33013	City-State-Zip:	HIALEAH FL 33013

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: CARLOS RODRIGUEZ

MANAGER

04/14/2023

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 14, 2023 Secretary of State 2699934577CC

Date

Certificate of Status Desired: No