

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000221039

**Entity Name:** AMADO HEALTH, LLC

**Current Principal Place of Business:**

8512 TOURMALINE BLVD  
BOYNTON BEACH, FL 33472

**Current Mailing Address:**

8512 TOURMALINE BLVD  
BOYNTON BEACH, FL 33472

**FEI Number:** 84-4768015

**Certificate of Status Desired:** Yes

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

AMADO, JUAN A  
8512 TOURMALINE BLVD  
BOYNTON BEACH, FL 33472 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:** JUAN A. AMADO

02/17/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            OWNER  
Name            AMADO HEALTH LLC  
Address        8512 TOURMALINE BLVD  
City-State-Zip: BOYNTON BEACH FL 33472

*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:** AMADO HEALTH LLC

OWNER

02/17/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date