

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000275675

Entity Name: JWH NORTH MIAMI I, LLC**Current Principal Place of Business:**3435 N.E. 163RD STREET
NORTH MIAMI BEACH, FL 33160**Current Mailing Address:**2600 DOUGLAS ROAD
400
CORAL GABLES, FL 33134 US**FEI Number:** 85-3089396**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FORS, JORGE L. JR.
1108 PONCE DE LEON BLVD.
CORAL GABLES, 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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|------------------------------|
| Title | MGR |
| Name | JUSTWELL HEALTH, LLC |
| Address | 2600 DOUGLAS ROAD, SUITE 400 |
| City-State-Zip: | CORAL GABLES FL 33134 |

| | |
|-----------------|------------------------------|
| Title | MGR |
| Name | POZO, JUSTO L |
| Address | 2600 DOUGLAS ROAD, SUITE 400 |
| City-State-Zip: | CORAL GABLES FL 33134 |

| | |
|-----------------|--------------------------|
| Title | MGR |
| Name | POZO, JUSTO LUIS III |
| Address | 2600 DOUGLAS ROAD 400 |
| City-State-Zip: | CORAL GABLES FL 33134 |

| | |
|-----------------|--------------------------|
| Title | MGR |
| Name | NIEBLA, MANUEL A. |
| Address | 2600 DOUGLAS ROAD 400 |
| City-State-Zip: | CORAL GABLES 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: MANUEL A. NIEBLA**MANAGER****05/01/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date