

2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L21000238890

Entity Name: ALL NURSING STAFFING, LLC

Current Principal Place of Business:

2740 OAK RIDGE COURT
STE 302
FORT MYERS, FL 33919

Current Mailing Address:

2740 OAK RIDGE COURT
302
FORT MYERS, FL 33919 US

FEI Number: 87-0992884

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARAISON, MARIO
2740 OAK RIDGE COURT
STE 302
FORT MYERS, FL 33919 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	OWNER	Title	OWNER
Name	PARAISON, MARIO	Name	JOCELYN, JOCELENE
Address	2740 OAK RIDGE COURT STE 302	Address	2740 OAK RIDGE COURT STE 302
City-State-Zip:	FORT MYERS FL 33919	City-State-Zip:	FORT MYERS FL 33919

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: JOCELENE JOCELYN

OWNER

11/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date