

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000309873

Entity Name: MAJOR LEAGUE HEALTHCARE PROVIDERS LLC

Current Principal Place of Business:

800 SE 4TH AVE.
SUITE 820
HALLANDALE BEACH, FL 33009

Current Mailing Address:

800 SE 4TH AVE.
SUITE 820
HALLANDALE BEACH, FL 33009 US

FEI Number: 87-1563083

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARCE, ANGEL L JR.
9851 FAIRWAY COVE LN
PLANTATION, FL 33324 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 ARCE, ANGEL L JR.
Address 9851 FAIRWAY COVE LN
City-State-Zip: PLANTATION FL 33324

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: ANGEL ARCE

MANAGER

05/01/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date