## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000418436

Entity Name: HEALTH PLUS URGENT CARE LLC

**Current Principal Place of Business:** 

3105 N UNIVERSITY DRIVE FT LAUDERDALE. FL 33311

**Current Mailing Address:** 

10726 CHARLESTON PLACE HOLLYWOOD. FL 33026 US

FEI Number: 82-5131052 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GULATI, MANJIT S 10726 CHARLESTON PLACE COOPER CITY, FL 33026 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

**FILED** Mar 10, 2024

**Secretary of State** 

7601871062CC

Authorized Person(s) Detail:

Title MGR

Title MGR

Name Name GULATI, MANJIT S **GULATI, SUKHVINER** 

10726 CHARLESTON PLACE Address 10726 CHARLESTON PLACE Address City-State-Zip: COOPER CITY FL 33026 City-State-Zip: COOPER CITY FL 33026

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail