## **2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000297005

Entity Name: SMART ER URGENT CARE LLC

**Current Principal Place of Business:** 

130 ISLAND WAY

CLEARWATER, FL 33767

**Current Mailing Address:** 

24 AVALON STREET CLEARWATER, FL 33767

FEI Number: 88-3335690 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOVEMBRE, LUIGI 24 AVALON ST

CLEARWATER BEACH, FL 33767 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 Jan 07, 2024

**Secretary of State** 

3871090430CC

Authorized Person(s) Detail:

Title MANAGER Title MEDICAL DIRECTOR

Name NOVEMBRE, LUIGI Name GROSSGOLD, ANDREAS DR.

Address 24 AVALON ST Address 24 AVALON STREET

City-State-Zip: CLEARWATER BEACH 33767 City-State-Zip: CLEARWATER FL 33767

Title MANAGER

Name ARC CAPITAL INC.
Address 24 AVALON STREET

City-State-Zip: CLEARWATER FL 33767

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: LUIGI NOVEMBRE

**GENERAL MANAGER** 

01/07/2024