

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000458209

Entity Name: ADONAI HEALTHCARE SERVICES LLC

Current Principal Place of Business:

5979 NW 151 ST
SUITE 102 F
MIAMI LAKES, FL 33014

Current Mailing Address:

5979 NW 151 ST
SUITE 102 F
MIAMI LAKES, FL 33014

FEI Number: 92-0852008

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOLLINCHE, FRANCISCO
5979 NW 151 ST
SUITE 102 F
MIAMI LAKES, FL 33014 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 AUTHORIZED MEMBER
Name TOLLINCHE, FRANCISCO
Address 5979 NW 151 ST, SUITE 102 F
City-State-Zip: MIAMI LAKES FL 33014

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: FRANCISCO TOLLINCHE

AMBR

01/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date