2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2024
Secretary of State
3432828643CC

DOCUMENT# L22000524471

Entity Name: UNION FAMILY HEALTH CARE LLC

Current Principal Place of Business:

50 BELMONT ST
SUITE A
LABELLE, FL 33935

Current Mailing Address:

50 BELMONT ST
SUITE A
LABELLE, FL 33935 US

FEI Number: 92-1393313

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABALLE MOSQUEDA, MARIO
621 9TH ST SW
NAPLES, FL 34117 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	ABALLE MOSQUEDA, MARIO
Address	621 9TH ST SW
City-State-Zip:	NAPLES FL 34117

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: ABALLE MOSQUEDA, MARIO MGR 04/25/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date