

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000199829

**Entity Name:** EXHALE MEDSTAFFING "LLC"

**Current Principal Place of Business:**

2803 SW 81ST TERRACE  
DAVIE, FL 33328

**Current Mailing Address:**

2803 SW 81ST TERRACE  
DAVIE, FL 33328 US

**FEI Number:** 92-3685289

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FRANCIS, VANQUILLA S  
2803 SW 81ST TERRACE  
DAVIE, FL 33328 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	Title	MGR
Name	FRANCIS, JEFFERY F	Name	FRANCIS, VANQUILLA S
Address	2803 SW 81ST TERRACE	Address	2803 SW 81ST TERRACE
City-State-Zip:	DAVIE FL 33328	City-State-Zip:	DAVIE FL 33328

*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:** VANQUILLA S FRANCIS

**MGR**

**04/30/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date