

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000284879

**Entity Name:** GO4OUTCOMES, LLC

**Current Principal Place of Business:**

333 SUNSET DRIVE  
#708  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

333 SUNSET DRIVE  
#708  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 93-1877751

**Certificate of Status Desired:** No

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

LOVING, JACK  
888 S ANDREWS AVE  
#302  
FORT LAUDERDALE, FL 33316 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            ADAMS, KAREN  
Address        333 SUNSET DRIVE #708  
City-State-Zip: FORT LAUDERDALE FL 33301

Title            AMBR  
Name            ADAMS, PETER  
Address        333 SUNSET DRIVE #708  
City-State-Zip: FORT LAUDERDALE FL 33301

*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:** PETER C. ADAMS

**MEMBER**

**02/08/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date