

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000003035

Entity Name: ALIRA HEALTH BOSTON LLC

Current Principal Place of Business:

1 GRANT STREET, STE. 400
FRAMINGHAM, MA 01702

Current Mailing Address:

1 GRANT STREET, STE. 400
FRAMINGHAM, MA 01702 US

FEI Number: 01-0933936

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 BRAMBILLA, GABRIELE
Address 1 GRANT STREET, STE. 400
City-State-Zip: FRAMINGHAM MA 01702

Title MGR
Name CHAMBON, BENJAMIN
Address 1 GRANT STREET, STE. 400
City-State-Zip: FRAMINGHAM MA 01702

Title MGR
Name CARLSON, MARGARET K
Address 1 GRANT STREET, STE. 400
City-State-Zip: FRAMINGHAM MA 01702

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: MARGARET K. CARLSON

MANAGER

01/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date