

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029332

Entity Name: ORTHOPEDIX NETWORK SOLUTIONS OF FLORIDA, LLC

Current Principal Place of Business:

3750 NW 87TH AVENUE
SUITE 500
DORAL, FL 33178

Current Mailing Address:

3750 NW 87TH AVENUE
SUITE 500
DORAL, FL 33178 US

FEI Number: 22-3880498

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOMINGUEZ, JENNIFER H
3750 NW 87TH AVENUE
SUITE 500
DORAL, FL 33178 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: JENNIFER H. DOMINGUEZ

04/10/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name JOHNSON, RONNIE D
Address 3750 NW 87TH AVENUE
SUITE 500
City-State-Zip: DORAL FL 33178

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: RONNIE D JOHNSON

MGRM

04/10/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date