

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000004414

**Entity Name:** AHLC, LLC.

**Current Principal Place of Business:**

7750 SW 115TH STREET  
MIAMI, FL 33156-4426

**Current Mailing Address:**

7750 SW 115TH STREET  
MIAMI, FL 33156-4426 US

**FEI Number:** 61-1998051

**Certificate of Status Desired:** No

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

ABELS, MICHAEL  
7750 SW 115 ST  
MIAMI, FL 33156 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:** MICHAEL ABELS

01/22/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ABELS, MICHAEL M.D.  
Address 7750 SW 115TH STREET  
City-State-Zip: MIAMI FL 33156-4426

*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:** MICHAEL ABELS MD

MGR

01/22/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date