

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000170837

Entity Name: MEDICARE MONTE LLC

Current Principal Place of Business:

8983 OKEECHOBEE BLVD
#202-122
WEST PALM BEACH, FL 33411

Current Mailing Address:

8983 OKEECHOBEE BLVD
#202-122
WEST PALM BEACH, FL 33411 US

FEI Number: 87-1235220

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MONTE, TRACY
8983 OKEECHOBEE BLVD
#202-122
WEST PALM BEACH, FL 33411 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: TRACY MONTE

04/30/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRES
Name MONTE, TRACY
Address 8983 OKEECHOBEE BLVD
 #202-122
City-State-Zip: WEST PALM BEACH FL 33411

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: TRACY MONTE

PRESIDENT

04/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date