## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000084317

Entity Name: NEUROLOGICAL SENIOR SOLUTIONS LLC

**Current Principal Place of Business:** 

9830 SW 84TH STREET MIAMI, FL 33173

**Current Mailing Address:** 

9830 SW 84TH STREET MIAMI. FL 33173 US

FEI Number: 47-5523342 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BENAVIDES, XIOMARA 9830 SW 84TH STREET MIAMI, FL 33173 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: XIOMARA BENAVIDES 02/09/2025

Electronic Signature of Registered Agent

Date

FILED Feb 09, 2025

**Secretary of State** 

2859524681CC

## Authorized Person(s) Detail:

Title AMBR

Name BENAVIDES, XIOMARA Address 9830 SW 84TH STREET

City-State-Zip: MIAMI FL 33173

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.

Electronic Signature of Signing Authorized Person(s) Detail