

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000086056

Entity Name: PRIMARY CARE LLC

Current Principal Place of Business:

2301 NORTH UNIVERSITY DRIVE
SUITE 104
PEMBROKE PINES, FL 33024

Current Mailing Address:

2301 NORTH UNIVERSITY DRIVE
SUITE 104
PEMBROKE PINES, FL 33024 US

FEI Number: 47-4019627

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SALAZAR, FRANCIS
2301 NORTH UNIVERSITY DRIVE
SUITE 104
PEMBROKE PINES, FL 33024 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 SALAZAR, FRANCIS
Address 2301 NORTH UNIVERSITY DRIVE
SUITE 104
City-State-Zip: PEMBROKE PINES FL 33024

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: FRANCIS SALAZAR

MGR

04/24/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date