

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000020092

**Entity Name:** ACI INNOVATIVE HEALTHCARE SOLUTIONS, LLC

**Current Principal Place of Business:**

2455 LINDELL BLVD  
3102  
DELRAY BEACH, FL 33444

**Current Mailing Address:**

2455 LINDELL BLVD  
3102  
DELRAY BEACH , FL 33444 US

**FEI Number:** 81-5177004

**Certificate of Status Desired:** No

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

MR.  
13302 WINDING OAK COURT  
SUITE A  
TAMPA, FL 33612 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:** CHRISTOPHER ACEVEDO

05/01/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name ACEVEDO, CHRISTOPHER  
Address 2455 LINDELL BLVD. #3102  
City-State-Zip: DELRAY BEACH FL 33444

*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:** CHRISTOPHER ACEVEDO

MGR

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date