

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000161485

Entity Name: ADVANCED CARE FINANCIAL, LLC

Current Principal Place of Business:

5944 MICHAUX ST
BOCA RATON, FL 33433

Current Mailing Address:

5944 MICHAUX STREET
BOCA RATON, FL 33433 US

FEI Number: 82-2344263

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAPHAEL, LINDSAY E
1001 W YAMATO RD
SUITE 401
BOCA RATON , FL 33431 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: LINDSAY RAPHAEL

01/10/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name HALCOMB, CHRISTIAN S
Address 5944 MICHAUX STREET
City-State-Zip: BOCA RATON FL 33433

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: HALCOMB, CHRISTIAN S

MANAGER

01/10/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date