

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000006161

**Entity Name:** MELIUS HEALTHCARE CONSULTING LLC

**Current Principal Place of Business:**

1089 SW 134TH CT  
MIAMI, FL 33184

**Current Mailing Address:**

1089 SW 134TH CT  
MIAMI, FL 33184 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

PUENTE, YANED K  
5237 SUMMERLIN COMMONS  
SUITE 400  
FORT MYERS, FL 33907 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:** YANED K PUENTE

04/27/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name PUENTE, YANED  
Address 1089 SW 134TH CT  
City-State-Zip: MIAMI FL 33184

*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:** YANED PUENTE

AMBR

04/27/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date