

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000099050

Entity Name: NACER MIDWIFERY, L.L.C.

Current Principal Place of Business:

600 N. THACKER AVE.
SUITE D-42
KISSIMMEE, FL 34741

Current Mailing Address:

P.O. BOX 357563
GAINESVILLE, FL 32635 US

FEI Number: 85-0708875

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FILL IT OUT, L.L.C.
600 N. THACKER AVE.
SUITE D-51
KISSIMMEE, FL 34741 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: ODALIS MARIE SOTO VEGA

05/01/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name CAMACHO, DIALIS E
Address 600 N. THACKER AVE.
SUITE D-42
City-State-Zip: KISSIMMEE FL 34741

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: DIALIS E. CAMACHO

OWNER - MEMBER
MANAGER

05/01/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date