

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000221039

Entity Name: NEXX HEALTH DORAL LLC.**Current Principal Place of Business:**16650 NE 35TH AVENUE
NORTH MIAMI BEACH, FL 33160**Current Mailing Address:**16650 NE 35TH AVENUE
NORTH MIAMI BEACH, FL 33160 US**FEI Number:** 85-2375459**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DANIEL P. SOKOLOFF, CPA, PA
715 E. HILLSBORO BLVD.
2ND FLOOR
DEERFIELD BEACH, FL 33441 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:** DANIEL P SOKOLOFF

05/01/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	BOWES, BRIANNA	Name	GOINDOO, ROGER
Address	16650 NE 35TH AVENUE	Address	16650 NE 35TH AVENUE
City-State-Zip:	NORTH MIAMI BEACH FL 33160	City-State-Zip:	NORTH MIAMI BEACH FL 33160

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: ROGER GOINDOO

PRESIDENT

05/01/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date