

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000384666

**Entity Name:** NICOLE CAPODIECI, APRN, PLLC

**Current Principal Place of Business:**

723 SW 28TH AVE  
BOYNTON BEACH, FL 33435

**Current Mailing Address:**

723 SW 28TH AVE  
BOYNTON BEACH, FL 33435 US

**FEI Number:** 85-4321324

**Certificate of Status Desired:** No

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

NICOLE CAPODIECI, APRN, PLLC  
723 SW 28TH AVE  
BOYNTON BEACH, FL 33435 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:** NICOLE CAPODIECI

01/08/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name CAPODIECI, NICOLE M  
Address 723 SW 28TH AVE  
City-State-Zip: BOYNTON BEACH FL 33435

*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:** NICOLE CAPODIECI

OWNER

01/08/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date