

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000011980

Entity Name: BUSINESS EDGE HEALTHCARE SOLUTIONS LLC

Current Principal Place of Business:

14490 VINDEL CIRCLE
FORT MYERS, FL 33905

Current Mailing Address:

14490 VINDEL CIRCLE
FORT MYERS, FL 33905

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KILEO KARGBO, NSIA
14490 VINDEL CIRCLE
FORT MYERS, FL 33905 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED REPRESENTATIVE
Name KARGBO, NSIA M
Address 14490 VINDEL CIRCLE
City-State-Zip: FORT MYERS FL 33905

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: NSIA KILEO KARGBO

**AUTHORIZED
REPRESENTATIVE**

01/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date