

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000427798

Entity Name: CM NURSING, L.L.C.

Current Principal Place of Business:

411 MAJORCA AVE
CORAL GABLES, FL 33134

Current Mailing Address:

411 MAJORCA AVE
CORAL GABLES, FL 33134 US

FEI Number: 87-2864862

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, JAVIER E
411 MAJORCA AVE
CORAL GABLES, FL 33134 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 MGR
Name MARTINEZ, CRISTINA
Address 411 MAJORCA AVE
City-State-Zip: CORAL GABLES FL 33134

Title AP
Name OLIVARES, CENIT
Address 16212 NW 10TH STREET
City-State-Zip: PEMBROKE PINES FL 33028

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: CRISTINA MARTINEZ

MGR

01/24/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date