

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000090694

Entity Name: MORENO MEDICAL CENTER LLC

Current Principal Place of Business:

85 GRAND CANAL DR.
SUITE 400
MIAMI, FL 33144

Current Mailing Address:

P.O. BOX 228404
MIAMI, FL 33222 US

FEI Number: 88-0952701

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROJAS, KAREN I
85 GRAND CANAL DR.
SUITE 400
MIAMI, FL 33144 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 ROJAS, KAREN I
Address 8343 LAKE DRIVE APT 501
City-State-Zip: DORAL FL 33166

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: ROJAS, KAREN I

MANAGER

01/24/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date