

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000279217

Entity Name: NURSES GONE DIGITAL LLC**Current Principal Place of Business:**35246 US HWY 19 N
PMB109
PALM HARBOR, FL 34684**Current Mailing Address:**35246 US HWY 19 N
PMB109
PALM HARBOR, FL 34684 UN**FEI Number:** 88-2930215**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COBB, BROOKE A
16711 WHISPERING GLEN DR
LUTZ, FL 33558 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	CEO	Title	COO
Name	GIANNULIS, TERESA	Name	BROOKE , COBB
Address	35246 US HWY 19 N PMB109	Address	35246 US HWY 19 N PMB109
City-State-Zip:	PALM HARBOR FLORIDA 34684	City-State-Zip:	PALM HARBOR 34684

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: TERESA GIANNULIS

CEO

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date