

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000347480

Entity Name: AVENTURA FL CARE LLC

Current Principal Place of Business:

46 MAIN ST, STE 148
MONSEY, NY 10952

Current Mailing Address:

46 MAIN ST, STE 148
MONSEY, NY 10952 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEDIRITE HQ2 LLC
301 ARUTHUR GODFREY ROAD, SUITE 550
MIAMI BEACH, FL 33140 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 AMBR
Name FISCH, SAMUEL
Address 46 MAIN ST, STE 148
City-State-Zip: MONSEY NY 10952

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: SAMUEL FISCH

AMBR

02/27/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date