

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000480589

**Entity Name:** ABBY PEDIATRIC CARE, LLC

**Current Principal Place of Business:**

31 BARKLEY CIRCLE  
UNIT 2A  
FORT MYERS, FL 33907

**Current Mailing Address:**

31 BARKLEY CIRCLE  
UNIT 2A  
FORT MYERS, FL 33907 US

**FEI Number:** 88-4287641

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TAILLACQ BLANCO, DAYLI  
1052 NW 134 PL  
MIAMI, FL 33182 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:** DAYLI TAILLACQ BLANCO

02/10/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title ADMINISTRATOR  
Name TAILLACQ BLANCO, DAYLI  
Address 1052 NW 134 PLACE  
City-State-Zip: MIAMI FL 33182

*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:** DAYLI TAILLACQ BLANCO

ADMINISTRATOR

02/10/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date