

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000001775

Entity Name: HALF MOON EMPANADAS HOSPITALS LLC

Current Principal Place of Business:

5582 NE 4TH CT STE 7A
MIAMI, FL 33137-2698

Current Mailing Address:

5582 NE 4TH CT STE 7A
MIAMI, FL 33137-2698 US

FEI Number: 92-3168859

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GUZMAN ZAVALA, MARIA DEL PILAR CEO
5201 NE 5TH AVE
MIAMI, FL 33137 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: GUZMAN ZAVALA MARIA DEL PILAR

04/29/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name HME FLORIDA LLC
Address 5582 NE 4TH CT STE 7A
City-State-Zip: MIAMI FL 33137-2698

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: GUZMAN ZAVALA MARIA DEL PILAR

CEO

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date