

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000029548

Entity Name: MOORE HEALTH ADVANTAGE LLC

Current Principal Place of Business:

1438 HARRINGTON PARK DR.
JACKSONVILLE, FL 32225

Current Mailing Address:

1438 HARRINGTON PARK DR.
JACKSONVILLE, FL 32225 US

FEI Number: 92-1919171

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MOORE, BARBARA G
1438 HARRINGTON PARK DR.
JACKSONVILLE, FL 32225 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 MOORE, BARBARA G
Address 1438 HARRINGTON PARK DR.
City-State-Zip: JACKSONVILLE FL 32225

Title AMBR
Name BROWN, ROBERT K
Address 1438 HARRINGTON PARK DR.
City-State-Zip: JACKSONVILLE FL 32225

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: BARBARA G MOORE

MGR

01/03/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date