

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000065702

Entity Name: HEALTH COMPLETE ADVISORY LLC

Current Principal Place of Business:

705 EMIL DR
FORT PIERCE, FL 34982

Current Mailing Address:

705 EMIL DR
FORT PIERCE, FL 34982 US

FEI Number: 92-2299149

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OSORIO, DAVID
705 EMIL DR
FORT PIERCE, FL 34982 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 OSORIO, DAVID
Address 705 EMIL DR
City-State-Zip: FORT PIERCE FL 34982

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: DAVID OSORIO

MGR

03/27/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date