2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 11, 2024
Secretary of State
9561674483CC

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Entity Name: OHI WEST MEDICAL GROUP II, LLC

Current Principal Place of Business:

1414 KUHL AVE., MP 2
ORLANDO, FL 32806

Current Mailing Address:

1414 KUHL AVE., MP 2
ORLANDO, FL 32806 US

FEI Number: 92-3479126

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZIKA, RYAN ESQ.
207 W. GORE ST., SUITE 201
ORLANDO, FL 32806 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	ORLANDO HEALTH MEDICAL GROUP, INC.
Address	1414 KUHL AVE., MP 2
City-State-Zip:	ORLANDO FL 32806

Title	AREP
Name	HAWKINS, ERICK
Address	1414 KUHL AVE., MP 2
City-State-Zip:	ORLANDO FL 32806

Title	AREP
Name	DELATORRE, JOE
Address	1414 KUHL AVENUE MP 2
City-State-Zip:	ORLANDO FL 32806

Title	AREP
Name	STRONG, DAVID
Address	1414 KUHL AVE, MP 2
City-State-Zip:	ORLANDO FL 32806

Title	AREP
Name	D'ORTONA, CARY
Address	1414 KUHL AVENUE MP 2
City-State-Zip:	ORLANDO FL 32806

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: CARY D'ORTONA AREP 03/11/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date