

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000395712

**Entity Name:** NOMAD DVM LLC

**Current Principal Place of Business:**

4585 WESTON RD  
WESTON, FL 33331

**Current Mailing Address:**

4501 SW 25TH TERRACE  
FORT LAUDERDALE, FL 33312 US

**FEI Number:** 93-3160686

**Certificate of Status Desired:** Yes

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

RIVAS POLANCO, MIGUEL  
4585 WESTON RD  
WESTON, FL 33331 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            RIVAS POLANCO, MIGUEL  
Address        4501 SW 25TH TERRACE  
City-State-Zip: FORT LAUDERDALE FL 33312

*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:** MIGUEL RIVAS POLANCO

AMBR

03/29/2024

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date