

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000429392

Entity Name: CNA HEALTH SERVICES LLC

Current Principal Place of Business:

16601 SW 103 PL
MIAMI, FL 33157

Current Mailing Address:

16601 SW 103 PL
MIAMI, FL 33157

FEI Number: 93-3430272

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MENENDEZ, HAYDEE
16601 SW 103 PL
MIAMI, FL 33157 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 MENENDEZ, HAYDEE
Address 16601 SW 103 PL
City-State-Zip: MIAMI FL 33157

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: HAYDEE MENENDEZ

MGR

03/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date