2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 04, 2024
Secretary of State
4228265057CC

DOCUMENT# L23000502278

Entity Name: BETANCOURT APRN PRIMARY HEALTHCARE.LLC

Current Principal Place of Business:

4742 BLOSSOM DR
HOLIDAY, FL 34690

Current Mailing Address:

4742 BLOSSOM DR
HOLIDAY, FL 34690

FEI Number: APPLIED FOR

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BETANCOURT SANZ, ORLANDO
4742 BLOSSOM DRIVE
HOLIDAY, FL 34690 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	APRN
Name	BETANCOURT SANZ, ORLANDO
Address	4742 BLOSSOM DR
City-State-Zip:	HOLIDAY FL 34690

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: ORLANDO BETANCOURT SANZ — BETANCOURT APRN PRIMARY HEALTHCARE.LLC — 02/04/2024

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