

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000545077

**Entity Name:** A & S NURSING SERVICES LLC

**Current Principal Place of Business:**

14086 SW 260TH STREET  
105  
HOMESTEAD, FL 33032

**Current Mailing Address:**

14086 SW 260TH STREET  
105  
HOMESTEAD, FL 33032

**FEI Number:** 93-2480773

**Certificate of Status Desired:** No

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

RODRIGUEZ, AILIN  
14086 SW 260TH STREET  
105  
HOMESTEAD, FL 33032 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 MGRM  
Name RODRIGUEZ, AILIN  
Address 14086 SW 260TH STREET  
City-State-Zip: HOMESTEAD FL 33032

*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:** AILIN RODRIGUEZ

04/22/2025

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

\_\_\_\_\_  
Date