## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000321875

Entity Name: NUNEZ ADULT CARE II LLC

**Current Principal Place of Business:** 

2591 SW 124 AVE MIAMI, FL 33175

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2591 SW 124 AVE MIAMI. FL 33175 US

**Current Mailing Address:** 

FEI Number: 88-1803267 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOLINA, MARCOS N 15765 SW 76TH TERRACE MIAMI, FL 33193 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

FILED Apr 30, 2025

**Secretary of State** 

3231011123CC

## Authorized Person(s) Detail:

Title MGR

Name MOLINA, MARCOS N Address 2591 SW 124 AVE City-State-Zip: MIAMI FL 33175

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: MARCOS N MOLINA

**MGR** 

04/30/2025