

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000347209

Entity Name: NORTHWEST MEDICAL ALLIANCE LLC

Current Principal Place of Business:

17621 NW 44TH ROAD
MIAMI GARDENS, FL 33055

Current Mailing Address:

17621 NW 44TH ROAD
MIAMI GARDENS, FL 33055 UN

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARETUO, GEORGINA
4564 NW 114TH AVENUE
UNIT 1406
DORAL, FL 33178 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	P	Title	VP
Name	GARCIA RIBADULLA, YOANDRA	Name	CAMEJO MEDINA, DUNIEL
Address	17621 NW 44TH ROAD	Address	17621 NW 44TH ROAD
City-State-Zip:	MIAMI GARDENS FL 33055	City-State-Zip:	MIAMI GARDENS FL 33055

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: YOANDRA GARCIA RIBADULLA

PRESIDENT

04/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date