2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000003884

Entity Name: FLORIDA ACCOUNTABLE CARE SERVICES, LLC

Current Principal Place of Business:

483 NORTH SEMORAN BLVD.
SUITE 205
WINTER PARK, FL 32792

Current Mailing Address:

483 NORTH SEMORAN BLVD.
SUITE 205
WINTER PARK, FL 32792 US

FEI Number: 90-0600022

FILED
Apr 14, 2025
Secretary of State
9194261575CC

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAINI, VIKRAM J
483 NORTH SEMORAN BLVD.
SUITE 205
WINTER PARK, FL 32792 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	SAINI, VIKRAM
Address	483 NORTH SEMORAN BLVD., SUITE 205
City-State-Zip:	WINTER PARK FL 32792

Title	AMBR
Name	HEALTHCARE SERVICES OF FLORIDA, LLC
Address	483 NORTH SEMORAN BLVD. SUITE 205
City-State-Zip:	WINTER PARK FL 32792

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: XIMENA GOMEZ — ASSISTANT CONTROLLER — 04/14/2025

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