2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2025
Secretary of State
7054738645CC

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Entity Name: EDU HEALTHCARE, LLC

Current Principal Place of Business:

18820 STATESVILLE ROAD
CORNELIUS, NC 28031

Current Mailing Address:

PO BOX 2400
CORNELIUS, NC 28031 US

FEI Number: 26-0763414

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
3458 LAKESHORE DRIVE
TALLAHASSEE, FL 32312 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	MANAGING PARTNER	Title	MEMBER
Name	LEWIS, MATTHEW	Name	MCLAMP MANAGMENT, LLC
Address	7930 W KENTON CIRCLE # 220	Address	PO BOX 2400
City-State-Zip:	HUNTERSVILLE NC 28078	City-State-Zip:	CORNELIUS NC 28031

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: MATTHEW LEWIS MANAGING PARTNER 04/09/2025

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