

2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M23000008864

Entity Name: MIDDLETON FAMILY MEDICINE URGENT CARE, LLC

Current Principal Place of Business:

147 S. MAIN STREET
MIDDLETON, MA 01949

Current Mailing Address:

147 S. MAIN STREET
MIDDLETON, MA 01949 US

FEI Number: 47-1566157

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADRIANO, ANGELICA R
2828 SOUTHAMPTON DRIVE
MIDDLEBURG, FL 32068 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 ALLARA, MARK
Address 70 ECHO COVE RD
City-State-Zip: HAMILTON MA 01982

Title MGR
Name YOON, MICHAEL
Address 2 KINSON COURT
City-State-Zip: GEORGETOWN MA 01833

Title AUTH
Name TING, ANDREW
Address 23 BURNHAM RD
City-State-Zip: WENHAM MA 01984

Title MGR
Name MANN, DANA
Address 5 AGATHA WAY
City-State-Zip: NORTH READING MA 01864

Title MGR
Name TRAMONTOZZI, MEGAHN
Address 43 GREY LANE
City-State-Zip: LYNNFIELD MA 01940

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: MARK MD ALLARA

MGR

02/22/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date