

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M23000015980

Entity Name: FLAGLER HEALTHCARE SOLUTIONS, LLC

Current Principal Place of Business:

2 S. BISCAYNE BLVD., 20TH FL
MIAMI, FL 33131

Current Mailing Address:

2 S. BISCAYNE BLVD., 20TH FL
MIAMI, FL 33131 US

FEI Number: 99-0390265

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 COOTS, CHRISTOPHER
Address 2 S. BISCAYNE BLVD., 20TH FL
City-State-Zip: MIAMI FL 33131

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: CHRISTOPHER COOTS

MANAGER

04/12/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date