

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000407987

**Entity Name:** NUBO HEALTH LLC

**Current Principal Place of Business:**

3520 N 52ND AVE  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

3520 N 52ND AVE  
HOLLYWOOD, FL 33021 US

**FEI Number:** 92-0447579

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DAVIDSON, ATARA  
3520 N 52ND AVE  
HOLLYWOOD, FL 33021 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 MGRM  
Name DAVIDSON, ATARA  
Address 3520 N 52ND AVE  
City-State-Zip: HOLLYWOOD FL 33021

Title MGRM  
Name SOKOL, CHAYA  
Address 5691 BROOKFIELD CIRCLE WEST  
City-State-Zip: FORT LAUDERDALE FL 33312

*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:** ATARA DAVIDSON

**PARTNER**

**03/28/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date