

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000120168

**Entity Name:** BROCKMAN HEALTH, LLC

**Current Principal Place of Business:**

8050 SW 10TH STE  
PLANTATION, FL 33324

**Current Mailing Address:**

8050 SW 10TH STE  
PLANTATION, FL 33324 US

**FEI Number:** 92-2977240

**Certificate of Status Desired:** No

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

DICKENS WEALTH MANAGEMENT, LLC  
9100 CONROY WINDERMERE RD, STE 200  
WINDERMERE, FL 34786 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 BROCKMAN, DYLAN  
Address 1514 SW 147TH TERRACE  
City-State-Zip: PEMBROKE PINES FL 33027

*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:** DYLAN BROCKMAN

**MANAGER**

**04/22/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date