# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000255501

Entity Name: PRIME TIME NURSING LLC

#### Current Principal Place of Business:

1925 TALPECO RD TALLAHASSEE, FL 32303

# **Current Mailing Address:**

1925 TALPECO RD TALLAHASSEE, FL 32303 US

# FEI Number: 01-0783749

# Name and Address of Current Registered Agent:

ENZOR, KATRINA 1925 TALPECO RD TALLAHASSEE, FL 32303 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

# Authorized Person(s) Detail :

Title	AMBR
Name	ENZOR, KATRINA
Address	1925 TALPECO RD
City-State-Zip:	TALLAHASSEE FL 32303

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: KATRINA ENZOR

AMBR

05/16/2024 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED May 16, 2024 Secretary of State 3903873378CC

Certificate of Status Desired: No

Date