

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M23000003406

Entity Name: PRIME HEALTH NETWORK LLC

Current Principal Place of Business:

16192 COASTAL HIGHWAY
LEWES, DE 19958

Current Mailing Address:

16192 COASTAL HIGHWAY
LEWES, DE 19958 US

FEI Number: 92-1431980

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DONADO, JESSICA
9267 SW 227 ST UNIT 6
CUTLER BAY, FL 33190 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 DONADO, JESSICA
Address 9267 SW 227 ST UNIT 6
City-State-Zip: CUTLER BAY FL 33190

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: JESSICA DONADO

MANAGER

03/12/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date