

**STATE OF CALIFORNIA** 

CORPORATION

Office of the Secretary of State

STATEMENT OF INFORMATION

## BA20241921490

For Office Use Only



20241921490 0/30/2024

	California Secr 1500 11th Stre Sacramento, C (916) 657-5448	et California 95814			File No.: BA20241921490 Date Filed: 10/30/2024	
Entity Details			Numerie		Annonement Drefessional	
Corporation Name			Nursing Services and Case Management, Professional Corporation			
Entity No.			6441802			
Formed In			CALIF	ORNIA		
Street Address of Princip	al Office of Corp	oration				
Principal Address				4715 OCEAN FRONT WALK , #201 MARINA DEL REY, CA 90292		
Mailing Address of Corp	oration					
Mailing Address				750 W 7TH ST STE 201, PO BOX 811403 LOS ANGELES, CA 90017-9997		
Attention						
Street Address of California Office of Corporation Street Address of California Office				4715 OCEAN FRONT WALK , #201 MARINA DEL REY, CA 90292		
Officers						
Officer Name	Officer Address		Position(s)			
+ Aaron Speer	4715 OCEAN FRONT WALK #201 MARINA DEL REY, CA 90292		Chief Executive Officer, Secretary, Chief Financial Officer			
Additional Officers						
		Officer Address		Desition	Ctated Desition	
Officer N	ame	Officer Address	Position Stated Position			
		None	Entered			
Directore						
Directors	Director	Nomo		Directo	ar Addroop	
Director Name				Director Address		
+ Aaron Speer				4715 OCEAN FRONT WALK #201 MARINA DEL REY, CA 90292		
The number of va	cancies on Bo	ard of Directors is: 0	1			
Agent for Service of Pro						
California Registered Corporate Agent (1505)			UNITED STATES CORPORATION AGENTS, INC. Registered Corporate 1505 Agent			
Type of Business						
Type of Business				g service		
Email Notifications Opt-in Email Notifications				No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.		
Labor Judgment						

No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.						
Electronic Signature						
By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.						
Aaron Speer	10/30/2024					
Signature	Date					