



BA20241625459



STATE OF CALIFORNIA Office of the Secretary of State STATEMENT OF INFORMATION LIMITED LIABILITY COMPANY

California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448 For Office Use Only

-FILED-

File No.: BA20241625459 Date Filed: 9/10/2024

Entity Details	
Limited Liability Company Name	SkyBridge Healthcare, LLC
Entity No.	202463716245
Formed In	FLORIDA
Street Address of Principal Office of LLC	
Principal Address	4350 W CYPRESS ST SUITE 500 TAMPA, FL 33607
Mailing Address of LLC	
Mailing Address	4350 W CYPRESS ST SUITE 500 TAMPA, FL 33607
Attention	Kelly Honan
Street Address of California Office of LLC	
Street Address of California Office	1401 21ST ST STE R SACRAMENTO, CA 95811
Manager(s) or Member(s)	
Manager or Member Name	Manager or Member Address
Garrett Norman	4350 W CYPRESS ST SUITE 500 TAMPA, FL 33607
Agent for Service of Process	
California Registered Corporate Agent (1505)	REGISTERED AGENTS INC Registered Corporate 1505 Agent
Type of Business	-
Type of Business	Temporary healthcare staffing services
Email Notifications Opt-in Email Notifications	Yes, I opt-in to receive entity notifications via email.
Chief Executive Officer (CEO)	,
CEO Name	CEO Address
CLO Ivallie	CLO Addicess

Labor Judgment

No Manager or Member, as further defined by California Corporations Code section 17702.09(a)(8), has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal is pending, for the violation of any wage order or provision of the Labor Code.

Electronic Signature		
By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.		
Kelly Honan	09/10/2024	
Signature	Date	