## **SHAKORA WILLIAMS**

## License Number: CNA417247

Data As Of 7/7/2025

Profession Certified Nursing Assistant

License Status CNA417247

License Status Revoked/Active

License Expiration Date 5/31/2025

License Original Issue Date 04/01/2022

Address of Record If further information is needed, please contact the Department of Health at (850) 488-

0595.

Discipline on File Yes
Public Complaint Yes

Alerts Enforcement Alert

10/11/2024 5:01:46 PM

Emergency Suspension Order filed 10/11/2024.

# **Secondary Locations**

No secondary locations found.

# Discipline/Admin Action

## **Emergency Actions**

No Emergency Actions Found

## **Discipline Cases**

Name	License	Profession	City	State	Case#	Action Taken
WILLIAMS, SHAKORA	417247	CERTIFIED NURSI	FORT LAUDERDALE	FL	202233971	REVOCATION

## **Public Complaints**

Name	License	Profession	City	State	Case #	Action Taken
WILLIAMS, SHAKORA	417247	CERTIFIED NURSING ASSISTANT	FORT LAUDERDALE	FL	202233971	AC FILED

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

#### Discipline Public Records Request

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at: Division of Medical Quality Assurance
Public Records
4052 Bald Cypress Way, Bin C01

#### Please include the following:

Tallahassee, FL 32399-3251

- 1. Full name and license number of the practitioner;
- 2. Name and address where documents are to be sent; and
- 3. If you require certification of the documents, a \$25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

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