

2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000116263

FILED
Nov 21, 2014
Secretary of State

Entity Name: CARE GIVERS PLUS OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

55 SE 2ND AVE
410
DELRAY BEACH, FL 33444 US

Current Mailing Address:

55 SE 2ND AVE
410
DELRAY BEACH, FL 33444 US

New Principal Place of Business:

2500 QUANTUM LAKES DRIVE
203
BOYNTON BEACH, FL 33426 US

New Mailing Address:

2500 QUANTUM LAKES DRIVE
203
BOYNTON BEACH, FL 33426 US

FEI Number: 38-3853362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALON, DEVINE
185 NE 4TH AVENUE 203 EAST
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

JOHN, TURNER
150 NE 6TH AVE.
UNIT E
DELRAY BEACH, FL 33483 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: JOHN TURNER

11/21/2014

Electronic Signature of Registered Agent

Date

AUTHORIZED PERSONS:

Title: MGRM
Name: CARE GIVERS PLUS HOLDINGS, LLC
Address: 2500 QUANTUM LAKES DRIVE, SUITE 203
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MGRM
Name: TURNER, JOHN
Address: 2500 QUANTUM LAKES DRIVE, SUITE 203
City-St-Zip: DELRAY BEACH, FL 33444 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: JOHN TURNER

MGRM

11/21/2014

Electronic Signature of Authorized Person

Date