

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011126

Entity Name: INDEPENDENT LIVING SYSTEMS, LLC.

Current Principal Place of Business:

5201 BLUE LAGOON DR.
SUITE 270
MIAMI, FL 33126

FILED
Apr 18, 2013
Secretary of State
CC6093194798

Current Mailing Address:

5201 BLUE LAGOON DR.
SUITE 270
MIAMI, FL 33126 US

FEI Number: 45-0481642

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PLANA, NESTOR J
5201 BLUE LAGOON DRIVE
SUITE 270
MIAMI, FL 33126 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 MGRM
Name PLANA, NESTOR
Address 4900 SUNSET DRIVE
City-State-Zip: MIAMI FL 33143

Title MGRM
Name HARPER, FLOYD
Address 114 PEGASUS DRIVE
City-State-Zip: JUPITER FL 33477

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NESTOR PLANA

MBR

04/18/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date