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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.				
SIGNATURE: MIKE WATKINS	CHIEF EXECUTIVE OFFICER	02/04/2022		

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L08000051436

Entity Name: INDEPENDENCE VILLAGE LLC

Current Principal Place of Business:

525 N MLK JR BLVD TALLAHASSEE, FL 32301

Current Mailing Address:

525 N MLK JR BLVD TALLAHASSEE, FL 32301

FEI Number: 26-3768393

Name and Address of Current Registered Agent:

WATKINS, MIKE 525 N MLK JR BLVD TALLAHASSEE, FL 32301 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:

about named antity submits this statement for the summer of the summer its substant of the sum of the state of the sum of the

OIGHATORE.		
	Electronic Signature of Registered Agent	Date

Authorized Person(s) Detail :

Title	MGRM	Title	CEO
Name	BIG BEND COMMUNITY BASED CARE, INC.	Name	WATKINS, MIKE
Address	525 N MLK JR BLVD	Address	525 NORTH MARTIN LUTHER KING JR. BLVD
City-State-Zip:	TALLAHASSEE FL 32301	City-State-Zip:	TALLAHASSEE FL 32301

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 04, 2022 Secretary of State 2815169598CC

Certificate of Status Desired: No

Date