

**2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000117638

**Entity Name:** ADVOCATE HOME CARE HOLDINGS, LLC

**Current Principal Place of Business:**

801 NORTHPOINT PARKWAY  
WEST PALM BEACH, FL 33407

**Current Mailing Address:**

801 NORTHPOINT PARKWAY  
WEST PALM BEACH, FL 33407 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FORBES, BENJAMIN  
801 NORTHPOINT PARKWAY  
WEST PALM BEACH, FL 33407 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:** BENJAMIN FORBES

09/09/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MR.  
Name FORBES, BENJAMIN OWNER  
Address 801 NORTHPOINT PARKWAY  
City-State-Zip: WEST PALM BEACH FL 33407

*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:** BENJAMIN FORBES

OWNER

09/09/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date