### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000054625

Entity Name: MATUS NURSING CARE, LLC

## **Current Principal Place of Business:**

2751 OCEAN CLUB BLVD **APT 305** HOLLYWOOD, FL 33019

# **Current Mailing Address:**

2751 OCEAN CLUB BLVD **APT 305** HOLLYWOOD, FL 33019 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

MATUS, CARYN-JANE 2751 OCEAN CLUB BLVD **APT 305** HOLLYWOOD, FL 33019 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

**FILED** Jan 21, 2015

**Secretary of State** 

CC5622221238

### Authorized Person(s) Detail:

Title MGRM

MATUS, CARYN-JANE Name

2751 OCEAN CLUB BLVD APT 305 Address

City-State-Zip: HOLLYWOOD FL 33019

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: MATUS, CARYN-JANE

01/21/2015