## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000133108

Entity Name: SEBASTIAN ID CARE LLC

**Current Principal Place of Business:** 

7955 BAY STREET SUITE 2 SEBASTIAN, FL 32958

**Current Mailing Address:** 

7955 BAY STREET SUITE 2 SEBASTIAN, FL 32958 US

FEI Number: 46-3744196 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

2010 SOLUTIONS INC 2077 SEAWIND COURT INDIALANTIC, FL 32903 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** Apr 27, 2017

**Secretary of State** 

CC9889789213

## Authorized Person(s) Detail:

Title **MGRM** 

AISHA THOMAS-ST. CYR Name 146 MORGAN CIRCLE Address City-State-Zip: SEBASTIAN FL 32958

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.