oath; that I am a managing member or manager of the limited liability company or the receiver or		
that my name appears above, or on an attachment with all other like empowered.		
SIGNATURE: LINDA MENDEZ	COO	08/22/2023

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

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: LINDA MENDEZ

GALE, DONNA M 3700 COMMERCE PARKWAY

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

Authorized Person(s) Detail :

Title	VP, DIRECTOR	Title	COO, DIRECTOR
Name	JOBLOVE, KAREN	Name	MENDEZ, LINDA
Address	3700 COMMERCE PARKWAY	Address	3700 COMMERCE PARKWAY
City-State-Zip:	MIRAMAR FL 33025	City-State-Zip:	MIRAMAR FL 33025
Title	CEO, DIRECTOR	Title	CFO, DIRECTOR
Title Name	CEO, DIRECTOR BRADBURY, CHRISTOPHER J.	Title Name	CFO, DIRECTOR KLINK, DONALD K
	,		,
Name	BRADBURY, CHRISTOPHER J.	Name	KLINK, DONALD K

2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L13000151346

Entity Name: SOUTHEAST HOMECARE LLC

Current Principal Place of Business:

7719 NW 48TH STREET SUITES 230, 330 & 340 DORAL, FL 33166

Current Mailing Address:

3700 COMMERCE PARKWAY MIRAMAR, FL 33025-3912 US

FEI Number: 26-4771656

Name and Address of Current Registered Agent:

MIRAMAR, FL 33025-3912 US

FILED Aug 22, 2023 Secretary of State 3170461678CC

Date

Certificate of Status Desired: No

Date