

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000155326

Entity Name: CARE FACILITY MAINTENANCE, LLC

Current Principal Place of Business:

110 CORMORANT CT.
VERO BEACH, FL 32963

Current Mailing Address:

110 CORMORANT CT.
VERO BEACH, FL 32963 US

FEI Number: 46-4253990

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LU, JIACHEN
110 CORMORANT CT
VERO BEACH, FL 32963 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

Authorized Person(s) Detail :

Title MANAGER
Name LESSACK, ROBERT
Address 110 CORMORANT CT.
City-State-Zip: VERO BEACH FL 32963

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: ROBERT LESSACK

MANAGER

04/05/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date