

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000005497

**Entity Name:** TOTAL CARE MANAGEMENT, LLC

**Current Principal Place of Business:**

517 ARTHUR GODFREY RD  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

517 ARTHUR GODFREY RD  
MIAMI BEACH, FL 33140 US

**FEI Number:** 47-3334017

**Certificate of Status Desired:** No

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

SALOMON, SAGINA MGR  
517 ARTHUR GODFREY RD  
MIAMI BEACH, FL 33140 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:** SAGINA SALOMON

07/25/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name SALOMON, SAGINA  
Address 517 ARTHUR GODFREY RD  
City-State-Zip: MIAMI BEACH FL 33140

Title MGR  
Name STUMPF, JOSEPH  
Address 517 ARTHUR GODFREY RD  
City-State-Zip: MIAMI BEACH FL 33140

*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:** SAGINA SALOMON

MGR

07/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date