## 2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L15000005497

Entity Name: TOTAL CARE MANAGEMENT, LLC

**Current Principal Place of Business:** 

517 ARTHUR GODFREY RD MIAMI BEACH. FL 33140

## **Current Mailing Address:**

1900 N BAYSHORE DR 3416 MIAMI. FL 33132

FEI Number: 47-3334017 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

SALOMON, SAGINA MGR 1900 N BAYSHORE DR 3416 MIAMI, FL 33132 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 10/14/2019

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title MGR

Name SALOMON, SAGINA

Address 1900 N BAYSHORE DR #3416

City-State-Zip: MIAMI FL 33132

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.

Date

FILED Oct 14, 2019

**Secretary of State** 

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