

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000034223

Entity Name: CRUZ LOVIN CARE, LLC

Current Principal Place of Business:

342 HEATHER HILLS DRIVE
CLERMONT, FL 34711

Current Mailing Address:

342 HEATHER HILLS DRIVE
CLERMONT, FL 34711 US

FEI Number: 47-3266878

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MITRE ACCOUNTING & TAX SERVICES, LLC.
15701 SR 50 STE 202
CLERMONT, FL 34711 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: AUNDRE SCOTT

03/16/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name WATSON-GORDON, PERLENA E
Address 342 HEATHER HILLS DRIVE
City-State-Zip: CLERMONT FL 34711

Title MGR
Name GORDON, WINSTON
Address 342 HEATHER HILLS DRIVE
City-State-Zip: CLERMONT FL 34711

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: PERLENA WATSON-GORDON

MGRM

03/16/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date