

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000148830

Entity Name: EXCELLENCE SENIOR LIVING FACILITY, LLC

Current Principal Place of Business:

5950 LAKEHURST DRIVE
SUITE 182
ORLANDO, FL 32819

Current Mailing Address:

5950 LAKEHURST DRIVE
SUITE 182
ORLANDO, FL 32819 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PORTIGLIATTI GROUP, LLC
5950 LAKEHURST DRIVE
SUITE 169
ORLANDO, FL 32819 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 AMBR
Name PORTIGLIATTI, ANTHONY B
Address 8812 ELLIOTTS CT
City-State-Zip: ORLANDO FL 32836

Title AMBR
Name PORTIGLIATTI, FERNANDA G
Address 8812 ELLIOTTS CT
City-State-Zip: ORLANDO FL 32836

Title AMBR
Name PORTIGLIATTI, BRUNO D
Address 4412 CONROY CLUB DR
City-State-Zip: ORLANDO FL 32835

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: BRUNO D PORTIGLIATTI

AMBR

02/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date