

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000074675

Entity Name: ABA ALLIANCE HOME HEALTH SERVICES, LLC

Current Principal Place of Business:

10350 SW 110 ST
MIAMI, FL 33176

Current Mailing Address:

10350 SW 110 ST
MIAMI, FL 33176

FEI Number: 81-2304857

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALVARO, ROBERTO
10350 SW 110 ST
MIAMI, FL 33176 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 P
Name ALVARO, ROBERTO
Address 10350 SW 110 ST
City-State-Zip: MIAMI FL 33176

Title VP
Name MARTINEZ, YANELKYS
Address 10350 SW 110 ST
City-State-Zip: MIAMI FL 33176

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: YANELKYS MARTINEZ

VP

04/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date