JACKSONVIL	LETON RD LLE, FL 32258 US			
FEI Number: 81-4792698			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
DEMETRI, DARI 11700 TEMPLET JACKSONVILLE	ON RD			
The above named	entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Fl	lorida.
	entity submits this statement for the purpose of changing its regis : DARIAN DEMETRI	tered office or regis	tered agent, or both, in the State of Fi	orida. 02/04/2021
		tered office or regis	tered agent, or both, in the State of Fl	
SIGNATURE	DARIAN DEMETRI	tered office or regis	tered agent, or both, in the State of Fi	02/04/2021
SIGNATURE	DARIAN DEMETRI     Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Fl	02/04/2021
SIGNATURE	DARIAN DEMETRI     Electronic Signature of Registered Agent     Person(s) Detail :			02/04/2021
SIGNATURE Authorized F	DARIAN DEMETRI     Electronic Signature of Registered Agent     Person(s) Detail :     PRESIDENT	Title	VP	02/04/2021

DOCUMENT# L16000232648

Entity Name: AFFORDABLE CARE AGENCY LLC

## **Current Principal Place of Business:**

11700 TEMPLETON RD JACKSONVILLE, FL 32258

## **Current Mailing Address:**

11700 TEMPI ETON RD 

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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: DARIAN DEMETRI

VP

02/04/2021 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 04, 2021 **Secretary of State** 2207498923CC