		5			
	PO BOX 745	-			
	WESLEY CH	IAPEL, FL 33545 US			
FEI Number: 81-5436328				Certificate of Status Desired: No	
	Name and A	ddress of Current Registered Agent:			
	A GOOD CARE, LLC. 3727 FAWNMIST DR. WESLEY CHAPEL, FL 33544 US				
	The above named	ned entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.			
	SIGNATURE: VANESSA VELASQUEZ				
		. VANESSA VELASQUEZ			02/01/2019
		Electronic Signature of Registered Agent			02/01/2019 Date
	Authorized				
	Authorized	Electronic Signature of Registered Agent	Title	OWNER	
		Electronic Signature of Registered Agent Person(s) Detail :	Title Name	OWNER CARR, YOLANDA	
	Title	Electronic Signature of Registered Agent Person(s) Detail : OWNER			
	Title Name Address	Electronic Signature of Registered Agent Person(s) Detail : OWNER VELASQUEZ, VANESSA 3727 FAWNMIST DR.	Name	CARR, YOLANDA PO BOX 7458	

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: VANESSA VELASQUEZ

Electronic Signature of Signing Authorized Person(s) Detail

OWNER

02/01/2019

Date

FILED Feb 01, 2019 **Secretary of State** 3683986108CC

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000056160

Entity Name: A GOOD CARE, LLC.

Current Principal Place of Business:

3727 FAWNMIST DR. WESLEY CHAPEL, FL 33544

Current Mailing Address: