

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000158537

Entity Name: MEDICAL TRANSITIONAL CARE SERVICES, PLLC

Current Principal Place of Business:

6430 NW 104TH PATH
MEDLEY, FL 33178

Current Mailing Address:

6430 NW 104TH PATH
MEDLEY, FL 33178 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCIARTE VERA, JUAN MANUEL
6430 NW 104TH PATH
MEDLEY, FL 33178 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: JUAN MANUEL INCIARTE VERA

03/03/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name INCIARTE VERA, JUAN MANUEL
Address 6430 NW 104TH PATH
City-State-Zip: MEDLEY FL 33178

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: JUAN MANUEL INCIARTE VERA

MANAGER

03/03/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date