# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000167607

Entity Name: 1 CARE LLC

# **Current Principal Place of Business:**

13799 PARK BLVD 315 SEMINOLE, FL 33776

## **Current Mailing Address:**

13799 PARK BLVD 315 SEMINOLE, FL 33776

# FEI Number: 82-2400309

# Name and Address of Current Registered Agent:

MCCABE, STEVEN 13799 PARK BLVD SEMINOLE, FL 33776 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

#### Authorized Person(s) Detail :

TitleOWNERNameMCCABE, STEVENAddress13799 PARK BLVD<br/>315City-State-Zip:SEMINOLE FL 33776

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.

OWNER

SIGNATURE: STEVEN MCCABE

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

01/16/2018 Date