

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000116832

**Entity Name:** LOVING TENDER CARE, LLC.

**Current Principal Place of Business:**

4652 ASHBURN SQUARE DR  
TAMPA, FL 33610

**Current Mailing Address:**

4652 ASHBURN SQUARE DR  
TAMPA, FL 33610 US

**FEI Number:** 83-0523227

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

IBE, CHIKA  
4652 ASHBURN SQUARE DR  
TAMPA, FL 33610 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	MGR	Title	MGR
Name	IBE, CHIKA	Name	EGWUATU, CHINELO
Address	4652 ASHBURN SQUARE DR	Address	1729 JILLIAN RD
City-State-Zip:	TAMPA FL 33610	City-State-Zip:	BRANDON FL 33510

*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:** CHIKA IBE

**MANGER**

**03/18/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date