

**2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L18000134265

**Entity Name:** JANNEF HOME CARE, LLC

**Current Principal Place of Business:**

3088 WADDELL AVE  
WEST PALM BEACH, FL 33411

**Current Mailing Address:**

3088 WADDELL AVE  
WEST PALM BEACH, FL 33411 US

**FEI Number:** 83-0744366

**Certificate of Status Desired:** No

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

MONTFLEURY, MICHELINE  
3088 WADDELL AVE  
WEST PALM BEACH, FL 33411 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:** MICHELINE MONTFLEURY

10/08/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED REPRESENTATIVE  
Name MONTFLEURY, MICHELINE  
Address 3088 WADDELL AVE  
City-State-Zip: WEST PALM BEACH FL 33411

Title AUTHORIZED REPRESENTATIVE  
Name APSALON DORMINIER , BINETTE  
Address 5733 NW ZENITH DR  
City-State-Zip: PORT SAINT LUCIE FL 34986

*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:** MICHELINE MONTFLEURY

**AUTHORIZED  
REPRESENTATIVE**

10/08/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date