2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000065453

Entity Name: A CARING HOME ALF, LLC

Current Principal Place of Business:

15351 85TH RD N

LOXAHATCHEE. AL 33470

Current Mailing Address:

125 SOUTH SR 7 114-313 WELLINGTON, US 33414 US

FEI Number: 83-4245904 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PHYSICIAN'S CHOICE HEALTHCARE SERVICES, INC. 125 SOUTH SR 7 #114-313 WELLINGTON, FL 33414 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: PCHS 04/11/2023

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title AUTHORIZED REPRESENTATIVE

Name PHYSICIAN'S CHOICE HEALTHCARE

SERVICES, INC.

Address 125 SOUTH SR 7

SIGNATURE: PCHS, INC

114-313

City-State-Zip: WELLINGTON FL 33414

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.

Electronic Signature of Signing Authorized Person(s) Detail

AUTHORIZED REPRESENTATIVE 04/11/2023

FILED Apr 11, 2023

Secretary of State

7864567369CC

Date