

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000149442

Entity Name: 3 SISTER'S HOME CARE SOLUTIONS LLC**Current Principal Place of Business:**2888 HAVENDALE BLVD
WINTER HAVEN, FL 33881**Current Mailing Address:**2888 HAVENDALE BLVD
WINTER HAVEN, FL 33881 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HAWTHORNE, TENESIA D
2888 HAVENDALE BLVD
WINTER HAVEN, FL 33881 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:** TENESIA HAWTHORNE

04/28/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	BURROUGH, ANETRESS L
Address	930 TENNIS WAY
City-State-Zip:	HAINES CITY, FL 33844

Title	MGR
Name	ALLEN, SHANTEL C
Address	1211 30TH ST NW
City-State-Zip:	WINTER HAVEN FL 33881

Title	MGR
Name	HAWTHORNE, TENESIA D
Address	2719 AVENUE Q NW
City-State-Zip:	WINTER HAVEN FL 33881

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: TENESIA HAWTHORNE**CO OWNER**

04/28/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date