2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2020
Secretary of State
8400536295CC

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Entity Name: SUNSHINE CAREGIVERS LLC

Current Principal Place of Business:

16435 EAST PLEASURE DRIVE
LOXAHATCHEE, FL 33470

Current Mailing Address:

16435 EAST PLEASURE DRIVE
LOXAHATCHEE, FL 33470

FEI Number: 84-3932546

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LALL, DELON
16435 EAST PLEASURE DRIVE
LOXATCHEE, FL 33470 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
Name	LALL, DELON
Address	16435 EAST PLEASURE DRIVE
City-State-Zip:	LOXAHATCHEE FL 33470

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: DELON LALL PRESIDENT 01/15/2020

Electronic Signature of Signing Authorized Person(s) Detail — Date