

**2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L19000296758

**Entity Name:** COMPASSIONATED CARE LLC

**Current Principal Place of Business:**

121 AVILA CT  
DAVENPORT, AL 33896

**Current Mailing Address:**

121 AVILA CT  
DAVENPORT, FL 33896

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

ALFRED, WISMARD  
121 AVILA COURT  
DAVENPORT, FL 33896 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:** WISMARD ALFRED

10/21/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ALFRED, WISMARD  
Address 121 AVILA COURT  
City-State-Zip: DAVENPORT FL 33896

Title AMBR  
Name DORCE, TATIANA  
Address 121 AVILA COURT  
City-State-Zip: DAVENPORT FL 33896

Title AMBR  
Name JOSEPH, REGINALD  
Address 121 AVILA COURT  
City-State-Zip: DAVENPORT FL 33896

*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:** WISMARD ALFRED

MANAGER

10/21/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date