

2022 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L20000179645

Entity Name: SERVICEMEMBER CARE FACILITY LLC

Current Principal Place of Business:

1439 FOUR SEASON BLVD, LOT 113
TAMPA, FL 33613

Current Mailing Address:

1439 FOUR SEASON BLVD, LOT 113
TAMPA, FL 33613 US

FEI Number: 85-1810683

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CARSON, SHARRON
1439 FOUR SEASON BLVD, LOT 113
TAMPA, FL 33613 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: SHARRON CARSON

04/30/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name CARSON, SHARRON
Address 1439 FOUR SEASON BLVD, LOT 113
City-State-Zip: TAMPA FL 33613

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: SHARRON S CARSON

OWNER / MANAGER

04/30/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date