

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000190507

Entity Name: ABIGael HOUSE OF CARE LLC

Current Principal Place of Business:

7849 EMBASSY BLVD
MIRAMAR, FL 33023

Current Mailing Address:

7849 EMBASSY BLVD
MIRAMAR, FL 33023 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAMBERT, PHILOMENE
7849 EMBASSY BLVD
MIRAMAR, FL 33023 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 LAMBERT, PHILOMENE
Address 7849 EMBASSY BLVD
City-State-Zip: MIRAMAR FL 33023

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: PHILOMENE LAMBERT

07/30/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date