

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000233252

**Entity Name:** 1TOUCH TOTALCARE SOLUTIONS, LLC

**Current Principal Place of Business:**

840 SW 81ST AVE,  
SUITE 300-H  
NORTH LAUDERDALE, FL 33068

**Current Mailing Address:**

3350 NE 12TH AVE  
STE 70202  
OAKLAND PARK, FL 33334 US

**FEI Number:** 85-2488567

**Certificate of Status Desired:** Yes

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

SPIEGEL & UTRERA, P.A.  
1840 SOUTHWEST 22ND STREET, 4TH FLOOR  
MIAMI, FL 33145 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 ISAAC, SHERIKA  
Address 840 SW 81ST AVE,  
SUITE 300-H  
City-State-Zip: NORTH LAUDERDALE FL 33068

*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:** SHERIKA ISAAC

MGR

04/01/2023

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date