## 2022 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L20000295067

Entity Name: GRACECARE NURSING AGENCY, LLC

**Current Principal Place of Business:** 

1815 WAGON WHEEL CIR W TALLAHASSEE. FL 32317

**Current Mailing Address:** 

1815 WAGON WHEEL CIR W TALLAHASSEE, FL 32317 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RICOTAX & CARE SERVICES INC 20 E WASHINGTON ST STE F QUINCY, FL 32351 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: PETER GONZALEZ EA 05/24/2022

Electronic Signature of Registered Agent

Date

FILED May 24, 2022

**Secretary of State** 

1471876596CR

## Authorized Person(s) Detail:

Title MGR

Name OLOFIN, LOLA A

SIGNATURE: LOLA OLOFIN

Address 1815 WAGON WHEEL CIR W City-State-Zip: TALLAHASSEE FL 32317

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.

Electronic Signature of Signing Authorized Person(s) Detail

PRESIDENT 05/24/2022

Date