

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000004686

**Entity Name:** GEMY HOME HEALTH LLC

**Current Principal Place of Business:**

2101 VISTA PARKWAY  
260  
WEST PALM BEACH , FL 33411

**Current Mailing Address:**

2101 VISTA PARKWAY  
260  
WEST PALM BEACH , FL 33411 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

GEDE, GERMELIA  
2101 VISTA PARKWAY  
260  
WEST PALM BEACH , FL 33411 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 GEDE, GERMELIA  
Address 2101 VISTA PARKWAY  
260  
City-State-Zip: WEST PALM BEACH FL 33411

Title MANAGER  
Name LOUIS, FRANDY  
Address 2101 VISTA PARKWAY  
260  
City-State-Zip: WEST PALM BEACH FL 33411

*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:** GEDE , GERMELIA

MGR

04/24/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date