

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000241265

**Entity Name:** YELLOW ROSE HOME CARE LLC

**Current Principal Place of Business:**

561 PORTOFINO DRIVE  
KISSIMMEE, FL 34759

**Current Mailing Address:**

561 PORTOFINO DRIVE  
KISSIMMEE, FL 34759 US

**FEI Number:** 87-0938204

**Certificate of Status Desired:** No

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

ZENBUSINESS INC.  
336 E. COLLEGE AVE.  
SUITE 301  
TALLAHASSEE, FL 32301 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:** KHADIJEH HEMMATI

03/17/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name HAEGELE, NICOLE P  
Address 561 PORTOFINO DRIVE  
City-State-Zip: KISSIMMEE FL 34759

*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:** NICOLE P HAEGELE

MEMBER

03/17/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date