

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000152062

Entity Name: AGELESS CARE SOLUTIONS LLC

Current Principal Place of Business:

9373 VIA SAN GIOVANI ST
FORT MYERS, FL 33905

Current Mailing Address:

9373 VIA SAN GIOVANI ST
FORT MYERS, FL 33905 US

FEI Number: 88-1737100

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HOOSANG, LATOYA
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202 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: LATOYA HOOSANG

03/08/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name HOOSANG, LATOYA
Address 9373 VIA SAN GIOVANI ST
City-State-Zip: FORT MYERS FL 33905

Title AMBR
Name HOOSANG, FLOYD
Address 9373 VIA SAN GIOVANI ST
City-State-Zip: FORT MYERS FL 33905

Title MGR
Name HOOSANG, FLOYD
Address 9373 VIA SAN GIOVANI ST
City-State-Zip: FORT MYERS FL 33905

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: LATOYA HOOSANG

OWNER

03/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date