

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000503194

**Entity Name:** NEW JOURNEY HOME CARE SERVICES LLC

**Current Principal Place of Business:**

2875 S ORANGE AVE  
STE 500 #6391  
ORLANDO, FL 32806

**Current Mailing Address:**

2875 S ORANGE AVE  
STE 500 #6391  
ORLANDO, FL 32806 US

**FEI Number:** 92-1145604

**Certificate of Status Desired:** No

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

SPENCER, MILAIDI  
13360 TWINWOOD LANE APT2203  
ORLANDO, FL 32837 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 AP  
Name SPENCER, MILAIDI  
Address 13360 TWINWOOD LANE APT2203  
City-State-Zip: ORLANDO FL 32837

*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:** MILAIDI SPENCER

AP

04/26/2023

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

\_\_\_\_\_  
Date