

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000211092

Entity Name: OMI CARE SERVICES LLC

Current Principal Place of Business:

35 W 13TH ST
1
HIALEAH, FL 33010

Current Mailing Address:

35 W 13TH ST
1
HIALEAH, FL 33010

FEI Number: 92-3846427

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RODRIGUEZ GASCON, ODETTE
35 W 13TH ST
1
HIALEAH, FL 33010 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 AMBR
Name RODRIGUEZ GASCON, ODETTE
Address 35 W 13TH ST
City-State-Zip: HIALEAH FL 33010

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: RODRIGUEZ GASCON, ODETTE

PRESIDENTE

02/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date