

2023 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M1300000115

Entity Name: ACCESS HOME HEALTH OF FLORIDA, LLC

Current Principal Place of Business:

500 WEST MAIN STREET
LOUISVILLE, KY 40202

Current Mailing Address:

500 WEST MAIN STREET
LOUISVILLE, KY 40202 US

FEI Number: 06-1451363

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MANAGER, PRESIDENT
Name BENOIT, SUSAN ELIZABETH
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title MANAGER, CFO
Name DIAMOND, SUSAN MARIE
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title MANAGER, VP, ASSOCIATE GENERAL
 COUNSEL AND CORPORATE
 SECRETARY
Name RUSCHELL, JOSEPH MATTHEW
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

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: JOSEPH MATTHEW RUSCHELL

CORPORATE SECRETAR 12/04/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date