

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000001067

Entity Name: AMERIPRIDE HOME CARE, LLC

Current Principal Place of Business:

945 NE 105TH ROAD
SUITE A
KNOB NOSTER, MO 65336

Current Mailing Address:

945 NE 105TH ROAD
SUITE A
KNOB NOSTER, MO 65336 US

FEI Number: 46-1687754

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH CT NORTH
LOXAHATCHEE, FL 33470 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 MGRM
Name WRIGHT, TIMOTHY
Address 945 NE 105TH ROAD
SUITE A
City-State-Zip: KNOB NOSTER MO 65336

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: TIMOTHY WRIGHT

MEMBER

01/09/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date