

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000007490

Entity Name: CURE HOUSING, LLC

Current Principal Place of Business:

602 SOUTH STATE STREET
BUNNELL, FL 32110

Current Mailing Address:

99 LUTHER DR
PALM COAST, FL 32137 US

FEI Number: 47-5026780

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CURE, DEBORAH
99 LUTHER DR
PALM COAST, FL 32137 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 | Title | MANAGER |
| Name | CURE, DEBORAH | Name | CURE, PATRICK |
| Address | 99 LUTHER DR | Address | 99 LUTHER DR |
| City-State-Zip: | PALM COAST FL 32137 | City-State-Zip: | PALM COAST FL 32137 |

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: DEBORAH CURE

OWNER

04/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date