

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000006778

Entity Name: BAYADA PHYSICIAN SERVICES, LLC**Current Principal Place of Business:**4300 HADDONFIELD RD
PENNSAUKEN, NJ 08109**Current Mailing Address:**4300 HADDONFIELD RD
PENNSAUKEN, NJ 08109 US**FEI Number:** 81-2551030**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:** CHELSEY MARTINE

04/10/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	AUTHORIZED REPRESENTATIVE
Name	BAIADA, DAVID	Name	BAYADA HOME HEALTH CARE
Address	4300 HADDONFIELD RD	Address	99 CHERRY HILL ROAD SUITE 303
City-State-Zip:	PENNSAUKEN NJ 08109	City-State-Zip:	PARSIPPANY NJ 07054

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: SUSAN GINIGER**AUTHORIZED
SIGNATORY**

04/10/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date