## 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L04000041559

Entity Name: EUSTIS SENIOR CARE, LLC.

**FILED** Sep 20, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

228 NORTH CENTER STREET EUSTIS, FL 32726

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 950716 P.O. BOX 691027 LAKE MARY, FL 32795 ORLANDO, FL 32869

FEI Number: 13-4281401 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PERSAUD, HARRY 228 NORTH CENTER STREET EUSTIS, FL 32726

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: HARRY PERSAUD

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

MGR Title: (X) Change ( ) Addition () Delete PERSAUD, HARRY PERSAUD, HARRY Name: Name: Address: P.O. BOX 950716 Address: P.O. BOX 691027 City-St-Zip: LAKE MARY, FL 32795 City-St-Zip: ORLANDO, FL 32869

Title: MGR () Delete Title: MGR (X) Change ( ) Addition

PERSAUD, VERA PERSAUD, VERA Name: Name: Address: P.O. BOX 950716 Address: P.O. BOX 691027 City-St-Zip: LAKE MARY, FL 32795 City-St-Zip: ORLANDO, FL 32869

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: HARRY PERSAUD 09/20/2005