

2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L09000048942

Entity Name: WELL CARE LIVING LLC**FILED
Nov 17, 2011
Secretary of State****Current Principal Place of Business:**8610 SW 97 RD
MIAMI, FL 33173**New Principal Place of Business:****Current Mailing Address:**11120 SW 120 ST
MIAMI, FL 33176**New Mailing Address:**

FEI Number: 27-0395989 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:ECHAURI, ERNESTO
11120 SW 120 ST
MIAMI, FL 33176 US**Name and Address of New Registered Agent:**

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ECHAURI, ERNESTO
Address: 11120 SW 120 ST
City-St-Zip: MIAMI, FL 33176

I hereby 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: ERNESTO ECHAURI

MGRM

11/17/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date