

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000120638

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Entity Name:** IN HOME QUALITY CARE SERVICES,"LLC"

**Current Principal Place of Business:**

1944 FOLKSTONE PLACE  
WESLEY CHAPEL, FL 33543 US

**New Principal Place of Business:**

**Current Mailing Address:**

1944 FOLKSTONE PLACE  
WESLEY CHAPEL, FL 33543 US

**New Mailing Address:**

**FEI Number:** 80-0520764

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MASSEY, CAROL B  
1944 FOLKSTONE PLACE  
WESLEY CHAPEL, FL 33543 US

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

MASSEY, CAROL B  
1944 FOLKSTONE PLACE  
WESLEY CHAPEL, FL 33543 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: CAROL B .MASSEY

04/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MASSEY, CAROL B  
Address: 1944 FOLKSTONE PLACE  
City-St-Zip: WESLEY CHAPEL, FL 33543 US

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: CAROL B MASSEY

MGR

04/04/2012

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