

L 10000024934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

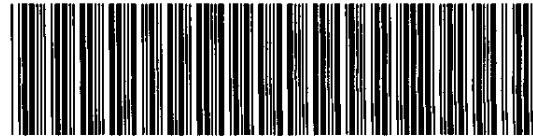
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
NOV - 6 2012



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 23, 2012

FIRST CHOICE ADULT DAYCARE AND HOME HEALTH CARE SERVICE
SUZETTE DENISE MILEY-PEARSON
5336 QUAN DR.
JACKSONVILLE, FL 32205

SUBJECT: FIRST CHOICE ADULT DAYCARE AND HOME HEALTH CARE
SERVICES, LLC
Ref. Number: L10000024934

We have received your document for FIRST CHOICE ADULT DAYCARE AND HOME HEALTH CARE SERVICES, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 912A00025990

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: First Choice Adult Daycare and Home Health Care Services
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Suzette Denise Miley-Pearson

Name of Person

First Choice Adult Daycare and Home Health Care Services

Firm/Company

5336 Quan Drive

Address

Jacksonville, Florida 32205

City/State and Zip Code

mrspearsonhere@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suzette Pearson

Name of Person

at (904) 5252918

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

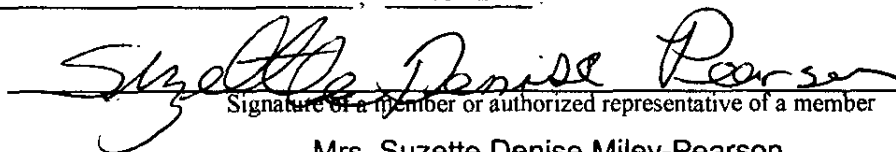
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Suzette Pearson	5336 Quan Drive Jacksonville, Florida 32205	<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated October 04, 2012


Signature of a member or authorized representative of a member

Mrs. Suzette Denise Miley-Pearson

Typed or printed name of signee