

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000072618

Entity Name: ELDER ASSISTANCE, LLC

FILED
Oct 05, 2012
Secretary of State

Current Principal Place of Business:

5620 MISSOURI AVE
NEW PORT RICKEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

5620 MISSOURI AVE
NEW PORT RICKEY, FL 34652

New Mailing Address:

FEI Number: 27-2867261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENGLE, KATHLEEN
12201 HOLBROOK DR UNIT 13
HUDSON, FL 34667 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: KATHLEEN MENGLE

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: MENGLE, KATHLEEN
Address: 12407 PARTRIDGE HILL ROW
City-St-Zip: HUDSON, FL 34667

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: KATHLEEN MENGLE

ADMI

10/05/2012

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