

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000035038

FILED
Apr 13, 2012
Secretary of State

Entity Name: NIGHTINGALE'S HOME HEALTH CARE, LLC

Current Principal Place of Business:

10305 NW 6 ST
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

10305 NW 6 ST
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: 45-0864848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEENA, BIJOY
10305 NW 6 ST
PLANTATION, FL 33324 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: MGR
Name: BIJOY, BEENA
Address: 10305 NW 6 ST
City-St-Zip: PLANTATION, FL 33324

Title: MGRM
Name: ABRAHAM, BIJOY
Address: 10305 NW 6 ST
City-St-Zip: PLANTATION, FL 33324 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: BEENA BIJOY

MANA

04/13/2012

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