

2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000052001

FILED
Sep 30, 2014
Secretary of State

Entity Name: A CARING ALTERNATIVE, L.L.C

Current Principal Place of Business:

5810 SPANISH RIVER ROAD
FORT PIERCE, FL 34951

New Principal Place of Business:

Current Mailing Address:

5810 SPANISH RIVER ROAD
FORT PIERCE, FL 34951

New Mailing Address:

P. O. BOX 3208
FORT PIERCE, FL 34948

FEI Number: 27-2833412

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HICKS, CASSANDRA
5810 SPANISH RIVER ROAD
FORT PIERCE, FL 34951 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: CASSANDRA HICKS

Electronic Signature of Registered Agent

Date

AUTHORIZED PERSONS:

Title: MGR
Name: HICKS, CASSANDRA
Address: P.O. BOX 3208
City-St-Zip: FORT PIERCE, FL 34948

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: CASSANDRA HICKS

MGR

09/30/2014

Electronic Signature of Authorized Person

Date