

L19 000 224419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

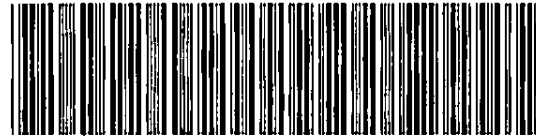
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300367922133

06/14/21--01024--003 **30.00

2021 JUN 11 PM 3:37
D
FILE

7/14/21
[Signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KINDRED GRACE HOMECARE LLC
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:

BETHESDA FLORVIL

Name of Person

KINDRED GRACE HOMECARE LLC

Firm/Company

1700 N DIXIE HWY

Address

DELRAY BEACH FL 33445

City, State and Zip Code

BETHESDADIEUJUSTE@GMAIL.COM

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

For further information concerning this matter, please call:

BETHESDA FLORVIL

561

251-1485

at ()

Name of Person

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

KINDRED GRACE HOMECARE LLC

If Changing Registered Agent, Signature of New Registered Agent

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	VINOX JULES	719 PLACE CHATEAU	☒ Add
		DELRAY BEACH FL 33445	☐ Remove
			☐ Change
AMBR	DUKENS, MUSTIVA	426 SW 14TH AVE	☐ Add
		DELRAY BEACH FL 33445	☒ Remove
			☐ Change
AMBR	SONIA ESTIME	3030 CORTEZ LANE	☒ Add
		DELRAY BEACH FL 33445	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

4/4/21. BLO
Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

Bethesda Florida

Typed or printed name of signee

2021 JUN 11 PM 3:37