

109000000089

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

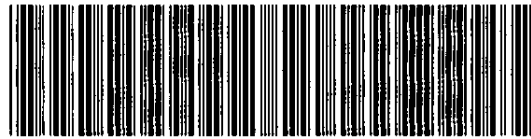
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

JUL 13 2010

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Amerilife & Health Services of Daytona Beach, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Terry M Duncan

Name of Person

Amerilife Group, LLC

Firm/Company

2536 Countryside Blvd #501

Address

Clearwater, FL 33763

City/State and Zip Code

sowens@aiaavcs.com

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

For further information concerning this matter, please call:

Terry Duncan

Name of Person

at ( 727 )

216-0859

Area Code and Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

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**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY  
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Amerilife & Health Services of Daytona Beach, LLC

2. This entity was formed under the laws of: Delaware

3. This entity was authorized to transact business in Florida on 01/06/2009  
and its Florida document/registration number is M09000000089

4. The name and address of each manager or managing member is as follows:

Title:  
"MGR" = Manager  
"MGRM" = Managing Member

Name and Address:

MGR

AL Amerilife, LLC  
2536 Countryside Blvd Ste 501  
Clearwater, FL 33763

FILED  
10 JUL 12 AM 11:29  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

Required Signature:   
Signature of Manager, Managing Member or Member

Filing Fee: \$25