

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054342

Entity Name: CITY OF ANGELS HOME HEALTH CARE, LLC.

Current Principal Place of Business:

13170 SW 128 STREET
SUITE 200
MIAMI, FL 33186

Current Mailing Address:

13170 SW 128 ST
200
MIAMI, FL 33186 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARIAS BOFILL, DAYMI M
13170 SW 128 STREET
SUITE 200
MIAMI, FL 33186 US

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

Authorized Person(s) Detail :

Title MGRM
Name ARIAS BOFILL, DAYMI M
Address 13170 SW 128 STREET - STE 200
City-State-Zip: MIAMI FL 33186

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAYMI M. ARIAS BOFILL

MANAGER

04/17/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date