2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 10, 2018
Secretary of State
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Entity Name: PLATINUMONE HOME HEALTH SERVICES LLC

Current Principal Place of Business:

5901 NW 151 ST
SUITE 107
MIAMI LAKES, FL 33014

Current Mailing Address:

5901 NW 151 ST
SUITE 107
MIAMI LAKES, FL 33014 US

FEI Number: 74-3190528

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARGUELLES L, ORNA LELANY L
5901 NW 151 ST
SUITE 107
MIAMI LAKES, FL 33014 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	MGR	Title	MGR
Name	ARGUELLES, REYNALDO L	Name	L. ARGUELLES, LORNA LELANY
Address	15315 NW 60 AVE SUIT G	Address	15315 NW 60 AVE SUITE G
City-State-Zip:	MIAMI LAKES FL 33014	City-State-Zip:	MIAMI LAKES FL 33014

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REYNALDO ARGUELLES MANAGER 01/10/2018

Electronic Signature of Signing Authorized Person(s) Detail — Date