2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2014
Secretary of State
CC1705632551

DOCUMENT# L09000085886

Entity Name: AGAPE FAMILY SERVICES, LLC

Current Principal Place of Business:

1635 EAST HIGHWAY 50
SUITE 200A
CLERMONT, FL 34711

Current Mailing Address:

6440 BERRY GROVES ROAD
CLERMONT, FL 34714 US

FEI Number: 27-0830899

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARCHER, DANIELLE
6440 BERRY GROVES ROAD
CLERMONT, FL 34714 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
Name	ARCHER, DANIELLE
Address	6440 BERRY GROVES ROAD
City-State-Zip:	CLERMONT FL 34714

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: DANIELLE ARCHER OWNER 04/28/2014

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