## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000125807

Entity Name: FUTURE CARE SOLUTION, LLC

**Current Principal Place of Business:** 

10101 SW 40 ST MIAMI, FL 33165

**Current Mailing Address:** 

10101 SW 40 ST MIAMI. FL 33165 US

FEI Number: 27-4141254 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ORAMA, MAYRILIAM 10101 SW 40 ST MIAMI, FL 33165 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: MAYRILIAM ORAMA 04/01/2019

Electronic Signature of Registered Agent

Date

FILED Apr 01, 2019

**Secretary of State** 

4451593109CC

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name ORAMA, MAYRILIAM Name ORAMA, MAYRISLEIDY

 Address
 10101 SW 40 ST
 Address
 10101 SW 40 ST

 City-State-Zip:
 MIAMI FL 33165
 City-State-Zip:
 MIAMI FL 33165

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: MAYRILIAM ORAMA

Electronic Signature of Signing Authorized Person(s) Detail

04/01/2019

**MGNR** 

Date