2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000023325

Entity Name: COMPANION HOME CARE SERVICES, LLC

Current Principal Place of Business:

4172 PINE HOLLOW CIRCLE GREENACRES. FL 33463

Current Mailing Address:

4172 PINE HOLLOW CIRCLE GREENACRES. FL 33463

FEI Number: 47-2487911 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOEL, MERLYNE 4172 PINE HOLLOW CIRCLE GREENACRES, FL 33463 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: MERLYNE NOEL 01/13/2021

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **OWNER**

Name NOEL, MERLYNE

Address 4172 PINE HOLLOW CIRCLE

City-State-Zip: GREENACRES FL 33463

SIGNATURE: NOEL, MERLYNE

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.

OWNER

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 13, 2021

Secretary of State

5021257712CC

Date

01/13/2021 Date