

2018 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L13000035660

Entity Name: FAITH TELEHEALTH CARE LLC

Current Principal Place of Business:

2875 NE 191 STREET
SUITE PH5
AVENTURA, FL 33180

Current Mailing Address:

2875 NE 191 STREET
SUITE PH5
AVENTURA, FL 33180

FEI Number: 27-6329874

Name and Address of Current Registered Agent:

CHRIS, BRYANT KING CFO
2875 NE 191 STREET
SUITE PH5
AVENTURA, FL 33180 US

Certificate of Status Desired: Yes

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: CHRIS BRYANT KING

12/10/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name BRYANT, CHRIS KING
Address 2875 NE 191 STREET
City-State-Zip: AVENTURA FL 33180

Title MGRM
Name SINO, ALEX
Address 2875 NE 191 STREET SUITE PH5
City-State-Zip: AVENTURA FL 33180

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: CHRIS BRYANT KING

CFO

12/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

**FILING CANCELLED
RETURNED CHECK**