

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000102457

Entity Name: HELENNA HEALTHCARE, LLC

Current Principal Place of Business:

21910 CYPRESS DR
36K
BOCA RATON, FL 33433

Current Mailing Address:

21910 CYPRESS DR
36K
BOCA RATON, FL 33433 US

FEI Number: 46-1370791

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOLE, MARY LOU
21910 CYPRESS DR
36K
BOCA RATON, FL 33433 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: MARY LOU BOLE

04/28/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED MEMBER
Name BOLE, MARY LOU
Address 21910 CYPRESS DR
36K
City-State-Zip: BOCA RATON FL 33433

Title AUTHORIZED MEMBER
Name KOENIGSMAN, GRANT JEFFREY
Address 21910 CYPRESS DR
36K
City-State-Zip: BOCA RATON FL 33433

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: MARYLOU BOLE

AUTHORIZED MEMBER

04/28/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date