

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000103855

Entity Name: GOOD LIFE CAREGIVERS LLC

Current Principal Place of Business:

9609 LINGWOOD TRAIL
ORLANDO, FL 32817

Current Mailing Address:

9609 LINGWOOD TRAIL
ORLANDO, FL 32817 US

FEI Number: 81-3857313

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAU, PUI M
9609 LINGWOOD TRAIL
ORLANDO, FL 32817 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: PUI M LAU

03/26/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name LAU , PUI M
Address 9609 LINGWOOD TRAIL
City-State-Zip: ORLANDO FL 32817

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: PUI M LAU

MANAGER

03/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date