

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000156084

**Entity Name:** ANGELIC COMPANION AND TRANSPORTATION SERVICES, LLC

**FILED**  
**May 31, 2014**  
**Secretary of State**  
**CC2161167379**

**Current Principal Place of Business:**

11537 PETERSHAM FALLS LANE  
JACKSONVILLE, FL 32258

**Current Mailing Address:**

11537 PETERSHAM FALLS LANE  
JACKSONVILLE, FL 32258

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MURRAY, GUY VICTOR ESQ.  
118 WEST ADAMS STREET, SUITE 320  
JACKSONVILLE, FL 32202 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name MATHIS DUNLAP, MARCIA  
Address 11537 PETERSHAM FALLS LANE  
City-State-Zip: JACKSONVILLE FL 32258

*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: MARCIA MATHIS DUNLAP**

**MGR**

**05/31/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date