

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000166124

**Entity Name:** COMFORT CARE ONE, LLC

**Current Principal Place of Business:**

2733 SW 27 AVE  
MIAMI, FL 33133

**Current Mailing Address:**

2733 SW 27TH AVE  
MIAMI, FL 33133 US

**FEI Number:** 46-4199618

**Certificate of Status Desired:** No

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

VALDES, ORLANDO J  
2733 SW 27TH AVE  
MIAMI, FL 33133 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:** ORLANDO J VALDES

01/25/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MANAGER
Name	VALDES, ORLANDO J	Name	VALDES, GLADYS
Address	2733 SW 27TH AVE	Address	2733 SW 27 AVE
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133

*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:** ORLANDO J VALDES

CEO

01/25/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date