

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000000142

Entity Name: M CARE LLC.

Current Principal Place of Business:

4226 TRUMPWORTH CT.
VALRICO, FL 33596

Current Mailing Address:

4226 TRUMPWORTH CT.
VALRICO, FL 33596

FEI Number: 46-5273805

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLULADE, MODUPE A
4226 TRUMPWORTH CT.
VALRICO, FL 33596 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: MODUPE A OLULADE

04/05/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name OLULADE, MODUPE
Address 4226 TRUMPWORTH CT.
City-State-Zip: VALRICO FL 33596

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: MODUPE A OLULADE

MGR

04/05/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date