

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000020311

Entity Name: COVENANT PALLIATIVE CARE SERVICES, LLC

Current Principal Place of Business:

5041 NORTH 12TH AVENUE
PENSACOLA, FL 32504

Current Mailing Address:

5041 NORTH 12TH AVENUE
PENSACOLA, FL 32504 US

FEI Number: 46-4822066

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, ROBERT L III, ESQ
501 COMMENDENCIA STREET
PENSACOLA, FL 32502 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: ROBERT L. JONES, III, ESQ.

04/07/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	PRESIDENT/CEO
Name	COVENANT HEALTH AND COMMUNITY SERVICES, INC.	Name	MISLEVY, JEFF
Address	5041 NORTH 12TH AVENUE	Address	5041 N 12TH AVE
City-State-Zip:	PENSACOLA FL 32504	City-State-Zip:	PENSACOLA FL 32504

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: JEFF MISLEVY

CEO

04/07/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date