

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000045808

Entity Name: EHOME COUNSELING, LLC

Current Principal Place of Business:

7450 DR. PHILLIPS BLVD.
SUITE 205
ORLANDO, FL 32819

Current Mailing Address:

7450 DR. PHILLIPS BLVD.
SUITE 205
ORLANDO, FL 32819

FEI Number: 61-1751926

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIRVEN, ROGERS W
7450 DR. PHILLIPS BLVD.
SUITE 205
ORLANDO, FL 32819 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: ROGERS KIRVEN

04/28/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name KIRVEN, ROGERS
Address 7450 DR. PHILLIPS BLVD., SUITE 205
City-State-Zip: ORLANDO FL 32819

Title AMBR
Name FIFTY K GROUP, LLC
Address 7450 DR. PHILLIPS BLVD., SUITE 205
City-State-Zip: ORLANDO FL 32819

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: ROGERS KIRVEN

**MANAGER OF
CORPORATION**

04/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date