2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 19, 2019
Secretary of State
2265727548CC

DOCUMENT# L14000076375

Entity Name: SPECIALISTS IN PALLIATIVE CARE, LLC

Current Principal Place of Business:

11948 FIVE WATERS CIRCLE
FT MYERS, FL 33913

Current Mailing Address:

11948 FIVE WATERS CIRCLE
FT MYERS, FL 33913 US

FEI Number: 47-2210727

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MELHADO, LOLITA
11948 FIVE WATERS CIRCLE
FT MYERS, FL 33913 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	Title	AMBR
Name	MELHADO, LOLITA	Name	MELHADO, VICTOR
Address	11948 FIVE WATERS CIRCLE	Address	11948 FIVE WATERS CIRCLE
City-State-Zip:	FT MYERS FL 33913	City-State-Zip:	FT MYERS FL 33913

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: LOLITA MELHADO MANAGER 01/19/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date