## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000155435

Entity Name: TOP CHOICE AMERICAN HOME CARE LLC

FILED
May 01, 2016
Secretary of State
CC7425506043

## **Current Principal Place of Business:**

15251 NE 18 AVENUE

STE 3

MIAMI, FL 33162

## **Current Mailing Address:**

15251 NE 18 AVENUE

STE 3

MIAMI, FL 33162 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CAREGIVER CONSULTING, INC. 15251 NE 18 AVENUE STE 3

MIAMI, FL 33162 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 MGR

NameARRENDELL, JULIANameCAREGIVER CONSULTING INCAddress1835 NE MIAMI GARDENS DR, STEAddress12555 BISCAYNE BLVD, STE 712

196

City-State-Zip: MIAMI BEACH FL 33179

Title AP

Name HART, CASWALL

Address 12555 BISCAYNE BLVD

STE 712

City-State-Zip: NORTH MIAMI FL 33181

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: CASWALL HART AUTHORIZI

Electronic Signature of Signing Authorized Person(s) Detail

AUTHORIZED PERSON

05/01/2016