

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000157303

Entity Name: BENIGN CARE, LLC

Current Principal Place of Business:

7110 SILVERMILL DR
TAMPA, FL 33635

Current Mailing Address:

7110 SILVERMILL DR
TAMPA, FL 33635

FEI Number: 47-2033566

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEE, CLARA J
7110 SILVERMILL DR
TAMPA, FL 33635 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 |
| Name | LEE, CLARA J | Name | REDWANC, ANTHONY A |
| Address | 7110 SILVERMILL DR | Address | 7110 SILVERMILL DR |
| City-State-Zip: | TAMPA FL 33635 | City-State-Zip: | TAMPA FL 33635 |

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: CLARA LEE

MGR

05/25/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date