2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2018
Secretary of State
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Entity Name: CUSTOMIZED CARE MANANGEMENT SERVICES, L.L.C.

Current Principal Place of Business:

4121 PARKER AVE
WEST PALM BEACH, FL 33405

Current Mailing Address:

3175 S. CONGRESS AVE
203
PALM SPRINGS , FL 33461 US

FEI Number: 47-4730748

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JESTINE, NERLYN J
3175 S. CONGRESS AVE
203
PALM SPRINGS , FL 33461 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: NERLYN JESTINE 04/30/2018

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	JESTINE, NERLYN J	Name	JESTINE, WIKENSON
Address	3175 S. CONGRESS AVE 203	Address	4121 PARKER AVE
City-State-Zip:	PALM SPRINGS FL 33461	City-State-Zip:	WEST PALM BEACH FL 33405

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: NERLYN JESTINE MANAGER 04/30/2018

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