

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000066523

Entity Name: ABLE LIFE CARE SERVICES, LLC.

Current Principal Place of Business:

757 SW NICHOLS TERRACE
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

757 SW NICHOLS TERRACE
PORT SAINT LUCIE, FL 34953 US

FEI Number: 47-3728667

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAZZ, STACY A
757 SW NICHOLS TERRACE
PORT SAINT LUCIE, FL 34953 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 AMBR
Name RAZZ, STACY A.
Address 3414 SW GALETTI ST
City-State-Zip: PORT SAINT LUCIE FL 34953

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: STACY RAZZ

AMBR

03/22/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date