

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000086617

Entity Name: TM CARE, LLC

Current Principal Place of Business:

430 CARTAGENA STREET
PUNTA GORDA, FL 33983

Current Mailing Address:

430 CARTAGENA STREET
PUNTA GORDA, FL 33983 US

FEI Number: 47-4080836

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROWLAND, PATRICIA A.
430 CARTAGENA STREET
PUNTA GORDA, FL 33983 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: PATRICIA A. ROWLAND

04/30/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	HEICK, TY J	Name	HEICK, MICHAEL
Address	430 CARTAGENA STREET	Address	430 CARTAGENA STREET
City-State-Zip:	PUNTA GORDA FL 33983	City-State-Zip:	PUNTA GORDA FL 33983

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: TY J HEICK

R/A

04/30/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date