

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000135505

Entity Name: NORTH STAR HOME HEALTH, LLC

Current Principal Place of Business:

39326 US 19 N
SUITE C
TARPON SPRINGS, FL 34689

Current Mailing Address:

39326 US 19 N
SUITE C
TARPON SPRINGS, FL 34689 US

FEI Number: APPLIED FOR

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

EAKES, EDWARD E JR.
2108 TARPON LANDINGS DRIVE
TARPON SPRINGS, FL 34688 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 P
Name EAKES, EDWARD E JR.
Address 2108 TARPON LANDINGS DRIVE
City-State-Zip: TARPON SPRINGS FL 34688

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: EDWARD E EAKES JR

PRESIDENT

04/04/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date