#### 2020 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L15000171499

Entity Name: 2ND STEP CARE LLC

Jul 14, 2020 Secretary of State 0855332087CC

**FILED** 

# **Current Principal Place of Business:**

20295 NW 2ND AVE

210

MIAMI GARDENS, FL 33169

# **Current Mailing Address:**

20295 NW 2ND AVE

210

MIAMI GARDENS, FL 33169 US

FEI Number: 85-1722583 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

LUBIN, JOEL 7601 E TEASURE DRIVE 917

NORTH BAY VILLAGE, FL 33141 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: JOEL LUBIN 07/14/2020

Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MANAGER
Name LUBIN, JOEL

Address 7601 E TEASURE DRIVE

917

City-State-Zip: NORTH BAY VILLAGE FL 33141

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: JOEL LUBIN MANAGER 07/14/2020