

2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L16000100463

Entity Name: ABSOLUTE HOME HEALTH TRAINING CENTER, LLC

Current Principal Place of Business:

7440 ROYAL PALM BLVD
MARGATE, FL 33063

Current Mailing Address:

7440 ROYAL PALM BLVD
MARGATE, FL 33063 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RELIFORD, ATISHA
7440 ROYAL PALM BLVD
MARGATE, FL 33063 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: ATISHA RELIFORD

09/29/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title P
Name RELIFORD, ATISHA
Address 7440 ROYAL PALM BLVD
City-State-Zip: MARGATE FL 33063

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: ATISHA RELIFORD

PRESIDENT

09/29/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date