

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000147702

Entity Name: AFM HEALTHCARE, LLC

Current Principal Place of Business:

7221 ALOMA AVE.
WINTER PARK, FL 32792

Current Mailing Address:

7221 ALOMA AVE.
WINTER PARK, FL 32792 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 MBR
Name ALILIN, ELEUTERIO R JR.
Address 7221 ALOMA AVE.
City-State-Zip: WINTER PARK FL 32792

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: ELEUTERIO ROGER ALILIN JR.

MEMBER

04/14/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date