## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000199228

Entity Name: BLUE FOUNTAIN II HOME CARE, LLC

**Current Principal Place of Business:** 

1317 SEQUOIA RD NW PALMBAY. FL 32907

**Current Mailing Address:** 

2440 EMERSON DRIVE SE PALMBAY, FL 32909 UN

FEI Number: 81-4308607 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DELINOIS, MAGDA 2440 EMERSON DRIVE SE PALMBAY, FL 32909 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: MAGDA DELINOIS 04/27/2024

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR

Name DELINOIS, MAGDA

Address 2440 EMERSON DRIVE SE

City-State-Zip: PALMBAY FL 32909

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: MAGDA DELINOIS OWNER

Electronic Signature of Signing Authorized Person(s) Detail

04/27/2024 Date

FILED Apr 27, 2024

**Secretary of State** 

3427742611CC

Date