## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000225313

Entity Name: AMERIHOME HEALTH CARE STAFFING LLC.

FILED
Apr 10, 2017
Secretary of State
CC1649654601

## **Current Principal Place of Business:**

9045 LA FONTANA BLVD.

228

BOCA RATON, FL 33434

# **Current Mailing Address:**

9045 LA FONTANA BLVD.

228

BOCA RATON, FL 33434

FEI Number: 80-0465775 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

ANDREACCI, TRINA D 9045 LA FONTANA BLVD. 228

BOCA RATON, FL 33434 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 MGR

Name ANDREACCI, DAN

Address 9045 LA FONTANA BLVD
City-State-Zip: BOCA RATON FL 33434

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.