## 2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L17000064048

Entity Name: MARIGOLD CARE FACILITY, LLC

**Current Principal Place of Business:** 

3703 ALAFAY HEIGHT RD **UNIT 305** ORLANDO, FL 32828

**Current Mailing Address:** 

3703 ALAFAYA HEIGHT RD UNT #305 ORLANDO, FL 32828 US

FEI Number: 82-2798825 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GEFFRARD, ROSEMENTHA 3703 ALAFAYA HEIGHTS RD **UNIT 305** ORLANDO, FL 32828 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: ROSEMENTHA GEFFRARD 05/15/2019

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MGR

SAUVEUR, SHARDY B Name Name GEFFRARD, ROSEMENTHA

3703 ALAFAYA HEIGHT RD 3703 ALAFAYA HEIGHT RD Address Address UNT #305

**UNIT 305** 

City-State-Zip: ORLANDO FL 32828 City-State-Zip: ORLANDO FL 32828

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.

Electronic Signature of Signing Authorized Person(s) Detail

**FILED** May 15, 2019

**Secretary of State** 

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