

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000122503

Entity Name: K-CARE LLC

Current Principal Place of Business:

509 WINGSTONE DR
PONTE VEDRA, FL 32081

Current Mailing Address:

509 WINGSTONE DR
PONTE VEDRA, FL 32081 US

FEI Number: 86-0833245

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VASQUEZ, ALFREDO
509 WINGSTONE DR
PONTE VEDRA, FL 32081 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 VASQUEZ, ALFREDO
Address 509 WINGSTONE DR
City-State-Zip: PONTE VEDRA FL 32081

Title AMBR
Name VASQUEZ, CHARLENE
Address 509 WINGSTONE DR
City-State-Zip: PONTE VEDRA FL 32081

Title AMBR
Name VASQUEZ FAMILY TRUST
Address 509 WINGSTONE DR
City-State-Zip: PONTE VEDRA FL 32081

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: ALFREDO VASQUEZ

MGR

03/21/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date