

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000079646

Entity Name: JOYFUL CARE LLC

Current Principal Place of Business:

6015 CHESTER CIR
STE 114
JACKSONVILLE, FL 32217

Current Mailing Address:

6015 CHESTER CIR
STE 114
JACKSONVILLE, FL 32217 US

FEI Number: 82-5018293

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSIER, BRANDI
6015 CHESTER CIR
STE 114
JACKSONVILLE, FL 32217 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 ROSIER, BRANDI
Address 2927 BEGONIA RD
City-State-Zip: JACKSONVILLE FL 32209

Title MGR
Name ROSIER, ALEAH
Address 6500 LAKE GRAY BLVD #322
City-State-Zip: JACKSONVILLE FL 32244

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: BRANDI L. ROSIER

MANGER

03/14/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date