

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000138574

**Entity Name:** XCARE SERVICES, PLLC

**Current Principal Place of Business:**

7231 SW 100TH CT  
MIAMI, FL 33173

**Current Mailing Address:**

7231 SW 100TH CT  
MIAMI, FL 33173 US

**FEI Number: 83-0830950**

**Certificate of Status Desired: No**

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

THE LAW OFFICES OF MAX A ADAMS ESQ PLLC  
2151 S LEJEUNE ROAD  
SUITE 306  
CORAL GABLES, FL 33134 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 DIEZ, DAMIAN  
Address 7231 SW 100TH CT  
City-State-Zip: MIAMI FL 33173

*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: DAMIAN DIEZ**

**MGR**

**04/02/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date