## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000253515

Entity Name: MY CARE FINDERS LLC

**Current Principal Place of Business:** 

6117 LAUREL CREEK TRAIL ELLENTON. FL 34222

**Current Mailing Address:** 

6117 LAUREL CREEK TRAIL ELLENTON, FL 34222

FEI Number: 83-2382639 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARTRIGHT, HEATHER NICOLE 6117 LAUREL CREEK TRAIL ELLENTON, FL 34222 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: HEATHER CARTRIGHT 02/05/2021

Electronic Signature of Registered Agent

Date

FILED Feb 05, 2021

**Secretary of State** 

2289878687CC

## Authorized Person(s) Detail:

Title MGR

Name CARTRIGHT, HEATHER
Address 6117 LAUREL CREEK TRAIL

City-State-Zip: ELLENTON FL 34222

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

SIGNATURE: HEATHER CARTRIGHT

MANAGER

02/05/2021

Date