

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000266030

**Entity Name:** ELOHIM ASSISTED LIVING LLC

**Current Principal Place of Business:**

5413 NW 56TH CT  
TAMARAC, FL 33319

**Current Mailing Address:**

5413 NW 56TH CT  
TAMARAC, FL 33319 US

**FEI Number:** 83-2582531

**Certificate of Status Desired:** No

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

WHYNES-BRADY, CHARMAINE  
5413 NW 56TH CT  
TAMARAC, FL 33319 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            PRESIDENT  
Name            BRADY, CHARMAINE WHYNES  
Address        5413 NW 56TH CT  
City-State-Zip: TAMARAC FL 33319

Title            MGR  
Name            BRADY, CHARMAINE WHYNES  
Address        5413 NW 56TH CT  
City-State-Zip: TAMARAC FL 33319

*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:** CHARMAINE WHYNES BRADY

**PRESIDENT**

**04/29/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date