

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000005128

Entity Name: IKHANIC CARE LLC

Current Principal Place of Business:

50 W RUBBER TREE DR
LAKE WORTH, FL 33467

Current Mailing Address:

50 W RUBBER TREE DR
LAKE WORTH, FL 33467 US

FEI Number: 83-3742468

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IRVIN, MARCIA
50 W RUBBER TREE DR
LAKE WORTH, FL 33467 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: MARCIA ADELLE IRVIN

06/30/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name IRVIN, MARCIA ADELLE
Address 50 W RUBBER TREE DR
City-State-Zip: LAKE WORTH FL 33467

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: MARCIA IRVIN

MGR

06/30/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date