2025 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Apr 23, 2025
Secretary of State
2701041988CR

DOCUMENT# L19000040746

Entity Name: COMPLETE HOME CARE OF NORTH FL LLC

Current Principal Place of Business:

408 DUPONT AVE
QUINCY , FL 32351

Current Mailing Address:

408 DUPONT AVE
QUINCY , FL 32351 US

FEI Number: 83-4422715

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SANTACRUZ, CARLOS
408 DUPONT AVE
QUINCY , FL 32351 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: CARLOS SANTACRUZ 04/23/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	SANTACRUZ, CARLOS
Address	408 DUPONT AVE
City-State-Zip:	QUINCY FL 32351

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: CARLOS SANTACRUZ MGR 04/23/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date