

**2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L19000151833

**Entity Name:** JENNIFER CARES LLC

**Current Principal Place of Business:**

2684 N UNIVERSITY DR  
UNIT 105  
SUNRISE, FL 33322

**Current Mailing Address:**

2684 N UNIVERSITY DR  
UNIT 105  
SUNRISE, FL 33322 US

**FEI Number:** 86-3034840

**Certificate of Status Desired:** No

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

SIMON, JENNIFER  
2684 N UNIVERSITY DR  
UNIT 105  
SUNRISE, FL 33322 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:** JENNIFER SIMON

08/25/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            MORIN, CHANTAL  
Address        9154 S ESSEX AVE  
City-State-Zip: CHICAGO IL 60617

Title            AUTHORIZED MEMBER  
Name            SIMON, JENNIFER  
Address        2684 N UNIVERSITY DR  
                    105  
City-State-Zip: SUNNRISE FL 33322

*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:** CHANTAL MORIN

**PRESIDENT**

08/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date