2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 10, 2025
Secretary of State
9051320981CC

DOCUMENT# L19000213480

Entity Name: ADVANTAGE POINTE HOME CARE LLC

Current Principal Place of Business:

6111 NW BROKEN SOUND PKW
SUITE 360
BOCA RATON, FL 33487

Current Mailing Address:

6111 NW BROKEN SOUND PKW
SUITE 360
BOCA RATON, FL 33487 US

FEI Number: 84-2879274

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SALL, ANNA
6111 NW BROKEN SOUND PKW
SUITE 360
BOCA RATON, FL 33487 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: SALL ANNA 02/10/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	SALL, ANNA
Address	6111 NW BROKEN SOUND PKWY SUITE 360
City-State-Zip:	BOCA RATON FL 33487

Title	AMBR
Name	MAJ2429 LLC
Address	1861 NW 42ND DRIVE
City-State-Zip:	BOCA RATON FL 33431

Title	AMBR
Name	8 APRONS LLC
Address	1861 NW 42ND DRIVE
City-State-Zip:	BOCA RATON FL 33431

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: ANNA SALL OWNER 02/10/2025

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