

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000146329

**Entity Name:** QUEEN'S QUALITY CARE, LLC

**Current Principal Place of Business:**

1173 RING ST  
DELTONTA, FL 32725

**Current Mailing Address:**

1173 RING ST  
DELTONTA, FL 32725 US

**FEI Number: 85-1321030**

**Certificate of Status Desired: No**

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

K PATH SOLUTIONS, INC  
9064 CASTLE BLVD  
JACKSONVILLE, FL 32208 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 MGR  
Name MAGEE, KHADIJAH  
Address 1173 RING ST  
City-State-Zip: DELTONTA FL 32725

*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: KHADIJAH MAGEE**

**OWNER**

**05/01/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date