

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000154874

Entity Name: AZAI CARE LINE LLC

Current Principal Place of Business:

1190 NW 122ND STREET
NORTH MIAMI, FL 33168

Current Mailing Address:

1190 NW 122ND STREET
NORTH MIAMI, FL 33168 US

FEI Number: 85-1492170

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ATTELUS, CRISTINE
1190 NW 122ND STREET
NORTH MIAMI, FL 33168 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 AR
Name ATTELUS, CRISTINE
Address 1190 NW 122ND STREET
City-State-Zip: NORTH MIAMI FL 33168

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: CRISTINE ATTELUS

OWNER

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date