

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000236242

Entity Name: CECILIO HEALTHCARE SERVICES LLC

Current Principal Place of Business:

4575 SW 112 TERR
APT 313
MIRAMAR, FL 33025

Current Mailing Address:

4575 SW 112 TERR
APT 313
MIRAMAR, FL 33025 US

FEI Number: 85-2561460

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

G A & G SERVICES LLC
1710 PILCHARD DRIVE
POINCIANA, FL 34759 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 | AMBR | Title | AMBR |
| Name | REYES RAMIREZ, CRISTINA | Name | CECILIO LA RIVA, RICARDO ANDRES |
| Address | 4575 SW 112 TERR APT 313 | Address | 4575 SW 112 TERR APT 313 |
| City-State-Zip: | MIRAMAR FL 33025 | City-State-Zip: | MIRAMAR FL 33025 |

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: RICARDO ANDRES CECILIO LA RIVA

04/22/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date