

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000274179

Entity Name: STARRY NIGHT HHCS LLC

Current Principal Place of Business:

1006 AVENUE G
FORT PIERCE, FL 34950

Current Mailing Address:

1006 AVENUE G
FORT PIERCE, FL 34950 US

FEI Number: 85-2996071

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, STOKEMA D
1006 AVENUE G
FORT PIERCE, FL 34950 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 OWNER/ AUTHORIZED
 REPRESENTATIVE
Name JONES, STOKEMA D
Address 1006 AVENUE G
City-State-Zip: FORT PIERCE FL 34950

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: JONES, STOKEMA D

OWNER

01/23/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date