

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000354547

Entity Name: ADORE' CARE, LLC

Current Principal Place of Business:

675 BONAPARTE DRIVE
JACKSONVILLE, FL 32218

Current Mailing Address:

1265 COASTAL MEADOW TRL
JACKSONVILLE, 32218 IS

FEI Number: 85-3989926

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCWAINE, JABRY W
675 BONAPARTE DRIVE
JACKSONVILLE, FL 32218 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: JABRY MCWAINE

03/14/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MCWAINE, MARY V
Address 6605 ELWOOD AVENUE
City-State-Zip: JACKSONVILLE FL 32208

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: MARY V MCWAINE

MISS

03/14/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date