2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000383232

Entity Name: LIKE FAMILY CARE LLC

Current Principal Place of Business:

16 SAINT CHARLES PLACE FLAGLER BEACH, FL 32136

Current Mailing Address:

16 SAINT CHARLES PLACE FLAGLER BEACH, FL 32136 US

FEI Number: 86-2697048 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, KATIE L 16 SAINT CHARLES PLACE FLAGLER BEACH, FL 32136 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: KATIE BROWN 05/01/2025

Electronic Signature of Registered Agent

Date

FILED May 01, 2025

Secretary of State

5211840465CC

Authorized Person(s) Detail:

Title **OWNER** Title **OWNER**

Name BROWN, KATIE L Name FINCH, CASEY

Address 16 SAINT CHARLES PLACE Address 21 WOOD AMBER LANE City-State-Zip: FLAGLER BEACH FL 32136 City-State-Zip: PALM COAST FL 32164

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.

OWNER

SIGNATURE: KATIE L BROWN

Electronic Signature of Signing Authorized Person(s) Detail

05/01/2025 Date