2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2025
Secretary of State
3028216625CC

DOCUMENT# L21000088569

Entity Name: GOOD CARE HOME HEALTH SERVICES LLC

Current Principal Place of Business:

885 N. POWERS DR
B
ORLANDO, FL 32818

Current Mailing Address:

885 N POWERS DRIVE
SUITE B
ORLANDO, FL 32818 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOUIS, SIMONETTE
885 N POWERS DR
SUITE B
ORLANDO, FL 32818 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	MANAGER, /PRESIDENT
Name	LOUIS, SIMONETTE
Address	885 N. POWERS DR B
City-State-Zip:	ORLANDO FL 32818

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: SIMONETTE LOUIS PRESIDENT 01/24/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date