

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000409061

Entity Name: ILS HHA OF REGION 4, LLC**Current Principal Place of Business:**4601 NW 77TH AVE
MIAMI, FL 33166**Current Mailing Address:**4601 NW 77TH AVE
MIAMI, FL 33166 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
801 US HWY 1
NORTH PALM BEACH, FL 33408 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	MGR
Name	PLANA, NESTOR J
Address	4601 NW 77TH AVE
City-State-Zip:	MIAMI FL 33166

Title	CFO
Name	THOMAS, TARLTON
Address	4601 NW 77TH AVE
City-State-Zip:	MIAMI FL 33166

Title	COO
Name	LILLIS, MAUREEN
Address	4601 NW 77TH AVE
City-State-Zip:	MIAMI FL 33166

Title	GENERAL COUNSEL/SECRETARY
Name	WILLIAMS, STUART F
Address	4601 NW 77TH AVE
City-State-Zip:	MIAMI FL 33166

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: NESTOR J. PLANAMANAGER, BY KAYLA
BLACKWELL, ATTORNEY-
IN-FACT

04/22/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date