## **2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L21000412377

Entity Name: ABRAHAM CARE SERVICES LLC

**Current Principal Place of Business:** 

5332 GREY HERON LANE JACKSONVILLE. FL 32257

**Current Mailing Address:** 

5332 GREY HERON LANE JACKSONVILLE, FL 32257 UN

FEI Number: 87-2739777 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MASSEBO, ABRAHAM D 5332 GREY HERON LANE JACKSONVILLE, FL 32257 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: ABRAHAM MASSEBO 09/30/2023

Electronic Signature of Registered Agent

Date

FILED Sep 30, 2023

**Secretary of State** 

6109803828CR

## Authorized Person(s) Detail:

Title AMBR

Name MASSEBO, ABRAHAM
Address 5332 GREY HERON LANE
City-State-Zip: JACKSONVILLE FL 32257

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.

MR

Electronic Signature of Signing Authorized Person(s) Detail