

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000048873

Entity Name: MINNIE'S RECOVERY CARE LLC

Current Principal Place of Business:

6983 103RD STREET
SUITE 1
JACKSONVILLE, FL 32210

Current Mailing Address:

7317 NORTSHORE DRIVE
JACKSONVILLE, FL 32208

FEI Number: 87-2896417

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

YOUNG, NITISHIA
6983 103RD STREET
SUITE-1
JACKSONVILLE, FL 32210 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 PRES
Name YOUNG, NITISHIA
Address 7317 NORTSHORE DRIVE
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: NITISHIA YOUNG, LPN

PRES

03/31/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date