

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000311066

Entity Name: DEAR TO CARE LLC

Current Principal Place of Business:

1969 SW MICHAELANGELO AVE
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

1969 SW MICHAELANGELO AVE
PORT SAINT LUCIE, FL 34953 US

FEI Number: 88-3253735

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEAR RECOVERY HOLDINGS LLC
1969 SW MICHAELANGELO AVE
PORT SAINT LUCIE, FL 34953 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: NICOLE HISLOP

04/06/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MBR
Name HISLOP, NICOLE
Address 1969 SW MICHAELANGELO AVE
City-State-Zip: PORT SAINT LUCIE FL 34953

Title AMBR
Name DEAR RECOVERY HOLDINGS LLC
Address 1969 SW MICHAELANGELO AVE
City-State-Zip: PORT SAINT LUCIE FL 34953

Title MBR
Name HISLOP, MESHACH
Address 1969 SW MICHAELANGELO AVE
City-State-Zip: PORT SAINT LUCIE FL 34953

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: MESHACH HISLOP

AMBR

04/06/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date