

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000451735

**Entity Name:** DPENKALA PROFESSIONAL DECEDENT CARE LLC

**Current Principal Place of Business:**

2507 DIANE AVE SE  
PALM BAY, FL 32909

**Current Mailing Address:**

2507 DIANE AVE SE  
PALM BAY, FL 32909 US

**FEI Number:** 92-3471203

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REPUBLIC REGISTERED AGENT LLC  
1150 NW 72ND AVE TOWER I STE 455  
MIAMI, FL 33126 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:** WESLEY DOLAN

04/04/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            PENKALA, DAVID  
Address        2507 DIANE AVE SE  
City-State-Zip: PALM BAY FL 32909

*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:** DAVID PENKALA

OWNER

04/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date