

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000046408

Entity Name: CARMi & NOCKY HOME HEALTHCARE SERVICE LLC

Current Principal Place of Business:

5418 CATTS ST
NAPLES, FL 34113

Current Mailing Address:

5418 CATTS ST
NAPLES, FL 34113

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASIMIR, MARIE CARMELLE
5418 CATTS ST
NAPLES, FL 34113 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 AUGUSTIN, ENOC
Address 5418 CATTS ST
City-State-Zip: NAPLES FL 34113

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: AUGUSTIN, ENOC

MGR

03/18/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date