

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000103908

Entity Name: UNLIMITED HOME CARE LLC

Current Principal Place of Business:

451 W. 62ND STREET
JACKSONVILLE, FL 32208

Current Mailing Address:

451 W. 62ND STREET
JACKSONVILLE, FL 32208 US

FEI Number: 92-1740852

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, MICHELLE N
451 W. 62ND STREET
JACKSONVILLE, FL 32208 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 CEO
Name JONES, MICHELLE N
Address 451 W. 62ND STREET
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: MICHELLE JONES

CEO

04/29/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date