2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2025
Secretary of State
1675119818CC

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Entity Name: AMISTAD HOME HEALTH AGENCY LLC

Current Principal Place of Business:

7700 N KENDALL DR
SUITE 403C
MIAMI, FL 33156

Current Mailing Address:

7700 N KENDALL DR
SUITE 403C
MIAMI, FL 33156 US

FEI Number: 92-3279388

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAYA, NATASHA
11730 SW 173 ST
MIAMI, FL 33177 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	P	Title	VP
Name	AGUILERA ALONSO, YUNIER	Name	MAYA, NATASHA
Address	11730 SW 173 ST	Address	11730 SW 173 ST
City-State-Zip:	MIAMI FL 33177	City-State-Zip:	MIAMI FL 33177

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: NATASHA MAYA VP 04/05/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date