2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L23000267445

Entity Name: HAPPY HOME BEST CARE, LLC.

FILED
May 03, 2024
Secretary of State
3681115529CC

Current Principal Place of Business:

5580 8TH ST W UNIT 1 LEHIGH ACRES, FL 33971

Current Mailing Address:

5580 8TH ST W UNIT 1 LEHIGH ACRES, FL 33971

FEI Number: 93-1468593 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FELIX, VALINA P 1010 SUSAN AVE N LEHIGH ACRES, FL 33971 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 Title AMBR

Name PIERRE, ERNITHE MD Name PIERRE, VANITHE MD

Address 1010 SUSAN AVE N Address 2910 31ST W

City-State-Zip: LEHIGH ACRES FL 33971 City-State-Zip: LEHIGH ACRES FL 33971

Title AP Title ADMINISTRATIVE

Name BAPTISTE, BONIA Name PIERRE FELIX , VALINA

Address 5426 TEXAS AVE Address 1010 SUSAN AVE N LEHIGH ACRES

City-State-Zip: NAPLES FL 34113 City-State-Zip: LEHIGH ACRES FL 33971

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: BONIA BAPTISTE

Electronic Signature of Signing Authorized Person(s) Detail

SUPERVISOR 05/03/2024

Date