

2025 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L24000303498

Entity Name: COLLABORATIVE CARE LLC

Current Principal Place of Business:

7480
ALOMA AVE
WINTER PARK, FL 32792

Current Mailing Address:

333 CROCKETTE BLVD
PO #541743
MERRITT ISLAND, FL 32954 US

FEI Number: 99-4200183

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IMAGES OF GLORY, INC.
7480 ALOMA AVE
WINTER PARK, FL 32792 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: KATHERINE NORFLEET, AUTHORIZED REPRESENTATIVE	IMAGES OF	04/01/2025
<u>GLORY, INC</u>		
Electronic Signature of Registered Agent		Date

Authorized Person(s) Detail :

Title	MANAGING MEMBER
Name	HUERTAS, TIYE
Address	7480 ALOMA AVE.
City-State-Zip:	WINTER PARK FL 32792

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: TIYE HUERTAS	AUTHORIZED PERSON	04/01/2025
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Electronic Signature of Signing Authorized Person(s) Detail		Date