

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M2000008121

**Entity Name:** ADAPTHEALTH PATIENT CARE SOLUTIONS LLC

**Current Principal Place of Business:**

220 W GERMANTOWN PIKE, SUITE 250  
PLYMOUTH MEETING, PA 19462

**Current Mailing Address:**

220 W GERMANTOWN PIKE, SUITE 250  
PLYMOUTH MEETING, PA 19462 US

**FEI Number:** 23-2736822

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

UNITED CORPORATE SERVICES, INC.  
3458 LAKESHORE DRIVE  
TALLAHASSEE , FL 32312 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	MBR
Name	JOYCE, CHRIS	Name	NRE HOLDING LLC
Address	220 W GERMANTOWN PK #250	Address	220 W GERMANTOWN PK #250
City-State-Zip:	PLYMOUTH MEETING PA 19462	City-State-Zip:	PLYMOUTH MEETING PA 19462

*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:** CHRIS JOYCE

**MANAGER**

**03/09/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date