

**2022 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL  
REPORT**

DOCUMENT# M21000010274

**Entity Name:** THE COVE HEALTH AND REHABILITATION, LLC

**Current Principal Place of Business:**

421 N MACARTHUR AVE  
PANAMA CITY, FL 32401

**Current Mailing Address:**

3273 SAN MATEO ST.  
CLEARWATER, FL 33759 US

**FEI Number:** 87-1933700

**Certificate of Status Desired:** No

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

HUSTON, TAYLOR ESQ.  
3273 SAN MATEO ST.  
CLEARWATER, FL 33759 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	MANAGER
Name	THE COVE SENIOR INVESTMENTS I, LLC	Name	THE COVE SENIOR INVESTMENTS II, LLC
Address	3273 SAN MATEO ST.	Address	3273 SAN MATEO ST.
City-State-Zip:	CLEARWATER FL 33759	City-State-Zip:	CLEARWATER FL 33759

*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:** TAYLOR HUSTON, ESQ.

**ATTORNEY**

**09/14/2022**

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

\_\_\_\_\_  
Date