## **2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M99000001679

Entity Name: MATRIX HOME CARE, LLC

**Current Principal Place of Business:** 

1800 S AUSTRALIAN AVENUE SUITE 350

WEST PALM BEACH, FL 33409

**Current Mailing Address:** 

1800 S AUSTRALIAN AVENUE SUITE 350 WEST PALM BEACH, FL 33409 US

FEI Number: 59-3603841 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OSTBERG, PERNILLE 1800 S. AUSTRALIAN AVENUE SUITE 350 WEST PALM BEACH, FL 33409 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

FILED Feb 20, 2024

**Secretary of State** 

9419953190CC

## Authorized Person(s) Detail:

Title MGRM

Name OSTBERG, PERNILLE

Address 1800 S. AUSTRALIAN AVENUE

SUITE 350 SUITE 100

City-State-Zip: WEST PALM BEACH FL 33409

SIGNATURE: PERNILLE OSTBERG

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.

Electronic Signature of Signing Authorized Person(s) Detail

PRESIDENT/CEO

Date

02/20/2024