

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000270077

**Entity Name:** JOY HOME CARE LLC

**Current Principal Place of Business:**

10544 BERMUDA ISLE DR  
TAMPA, FL 33647

**Current Mailing Address:**

10544 BERMUDA ISLE DR  
TAMPA, FL 33647 US

**FEI Number:** 87-1168480

**Certificate of Status Desired:** No

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

HUNTER SANTANA, YSLEIDA C  
10544 BERMUDA ISLE DR,  
TAMPA, FL 33647 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 AMBR  
Name HUNTER SANTANA, YSLEIDA C MS  
Address 10544 BERMUDA ISLE DR  
City-State-Zip: TAMPA FL 33647

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Title AMBR  
Name HUNTER SANTANA, YSLEIDA C MS  
Address 10544 BERMUDA ISLE DR,  
City-State-Zip: TAMPA FL 33647

*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:** YSLEIDA C HUNTER SANTANA

**OWNER**

**02/23/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date