

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000442081

**Entity Name:** FAITH CARE SERVICES LLC

**Current Principal Place of Business:**

1512 NE 51ST ST  
FORT LAUDERDALE, FL 33334

**Current Mailing Address:**

1512 NE 51ST ST  
FORT LAUDERDALE, FL 33334

**FEI Number:** 87-3277523

**Certificate of Status Desired:** No

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

PLANS MIRANDA, YASIMIN  
1512 NE 51ST ST  
FORT LAUDERDALE, FL 33334 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            PLANS MIRANDA, YASIMIN  
Address        1512 NE 51ST ST  
City-State-Zip: FORT LAUDERDALE FL 33334

*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:** YASIMIN PLANS MIRANDA

**PRESIDENT**

**03/13/2024**

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

\_\_\_\_\_ Date