



BA20241550246



**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**STATEMENT OF INFORMATION**  
**LIMITED LIABILITY COMPANY**

California Secretary of State  
1500 11th Street  
Sacramento, California 95814  
(916) 657-5448

For Office Use Only

**-FILED-**

File No.: BA20241550246

Date Filed: 8/27/2024

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Entity Details	
Limited Liability Company Name	DESTINY WELLCARE SERVICES, LLC
Entity No.	202463519471
Formed In	CALIFORNIA
Street Address of Principal Office of LLC	
Principal Address	7155 CITRUS AVE #218 FONTANA, CA 92336
Mailing Address of LLC	
Mailing Address	7155 CITRUS AVE #218 FONTANA, CA 92336
Attention	
Street Address of California Office of LLC	
Street Address of California Office	None
Manager(s) or Member(s)	
Manager or Member Name	Manager or Member Address
+ JUSTINA OBI	7155 CITRUS AVE 218 FONTANA, CA 92336
Agent for Service of Process	
Agent Name	JUSTINA OBI
Agent Address	7155 CITRUS AVE # 218 FONTANA, CA 92336
Type of Business	
Type of Business	HEALTH CARE SERVICES
Email Notifications	
Opt-in Email Notifications	No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.
Chief Executive Officer (CEO)	
CEO Name	CEO Address
+ JUSTINA OBI	7155 CITRUS AVE 218 FONTANA, CA 92336
Labor Judgment	
No Manager or Member, as further defined by California Corporations Code section 17702.09(a)(8), has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal is pending, for the violation of any wage order or provision of the Labor Code.	

Electronic Signature

☒ By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.

*JUSTINA OBI*

Signature

*08/27/2024*

Date