## 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000001691

Entity Name: MIAMI MENTAL HEALTH ASSOCIATES, LLC

Apr 28, 2010 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1803 CHULI NENE 1114 THOMASVILLE ROAD TALLAHASSEE, FL 32301

SUITE W

TALLAHASSEE, FL 32303

**Current Mailing Address: New Mailing Address:** 

1114 THOMASVILLE ROAD 1803 CHULI NENE TALLAHASSEE, FL 32301

SUITE W

TALLAHASSEE, FL 32303

FEI Number: 20-8187316 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DOMAN, SION DOMAN, SION

1114 THOMASVILLE ROAD 1803 CHULI NENE TALLAHASSEE, FL 32301 US SUITE W

TALLAHASSEE, FL 32303 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: SION DOMAN 04/28/2010

> Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

MGRM Name: DOMAN, SION

Address: 1114 THOMASVILLE ROAD, SUITE W

City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM

Name: BAEZA, ANGELICA

Address: 1114 THOMASVILLE ROAD, SUITE W

City-St-Zip: TALLAHASSEE, FL 32303

I hereby certify that the information indicated on this 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 608, Florida Statues.

SIGNATURE: SION DOMAN **MGRM** 04/28/2010