

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000090185

Entity Name: MANDARIN COVE COUNSELING, LLC

Current Principal Place of Business:

2950 HALCYON LANE, UNIT 703
JACKSONVILLE, FL 32223

Current Mailing Address:

2950 HALCYON LANE, UNIT 703
JACKSONVILLE, FL 32223

FEI Number: 27-0930547

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS
2950 HALCYON LANE
SUITE 703
JACKSONVILLE, FL 32223 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 MGRM
Name MOORE, PATRICIA A
Address 2950 HALCYON LANE, UNIT 703
City-State-Zip: JACKSONVILLE FL 32223

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: PATRICIA A. MOORE

MGRM

03/02/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date