

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000023713

Entity Name: ADDICTION ALTERNATIVES, LLC

Current Principal Place of Business:

266 NW PEACOCK BLVD.
SUITE 102
PORT ST LUCIE, FL 34986

Current Mailing Address:

266 NW PEACOCK BLVD.
SUITE 102
PORT ST LUCIE, FL 34986 US

FEI Number: 45-4579936

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUSCEMA, CHARLES A DR.
7400 LAURELS PLACE
PORT ST LUCIE, FL 34986 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: CHARLES A BUSCEMA MD

01/20/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | | | |
|-----------------|------------------------|-----------------|------------------------|
| Title | CEO, CHAIRMAN | Title | DIRECTOR, COO |
| Name | BUSCEMA, CHARLES A DR. | Name | BUSCEMA, DONNA M |
| Address | 7400 LAURELS PLACE | Address | 7400 LAURELS PLACE |
| City-State-Zip: | PORT ST LUCIE FL 34986 | City-State-Zip: | PORT ST LUCIE FL 34986 |

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: CHARLES A BUSCEMA, MD

CHAIRMAN, CEO

01/20/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date