## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000098161

Entity Name: MASTER SPEECH CLINIC, LLC

**Current Principal Place of Business:** 

346 HANGING MOSS CIRCLE LAKE MARY, FL 32746

**Current Mailing Address:** 

P.O. BOX 951586

LAKE MARY. FL 32795-1586 US

FEI Number: 46-0826819 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YAGUDA, KIYA J 346 HANGING MOSS CIRCLE LAKE MARY, FL 32746 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: KIYA J. YAGUDA 03/06/2024

Electronic Signature of Registered Agent

Date

FILED Mar 06, 2024

**Secretary of State** 

5369702323CC

Authorized Person(s) Detail:

Title MGR

Name YAGUDA, KIYA J

SIGNATURE: KIYA YAGUDA

Address 346 HANGING MOSS CIR City-State-Zip: LAKE MARY FL 32746

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.

**MGR**