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: JENNIFER FANIEL

Electronic Signature of Signing Authorized Person(s) Detail

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000068777

Entity Name: J.D. SPEECH PATHOLOGIST AND ASSOCIATES, LLC

Current Principal Place of Business:

4440 PGA BLVD SUITE 600 PALM BEACH GARDENS, FL 33410

Current Mailing Address:

4440 PGA BLVD SUITE 600 PALM BEACH GARDENS, FL 33410 US

FEI Number: 46-2750750

Name and Address of Current Registered Agent:

FANIEL, JENNIFER 4440 PGA BLVD SUITE 600 PALM BEACH GARDENS, FL 33410 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

Authorized Person(s) Detail :				
Title	AUTHORIZED REPRESENTATIVE	Title	PRESIDENT	
Name	FANIEL, SABRINA R	Name	FANIEL, JENNIFER	
Address	6007 NW WINFIELD DR.	Address	4440 PGA BLVD	
City-State-Zin	PORT ST. LUCIE FL 34986		SUITE 600	
Ony Otate Zip.		City-State-Zip:	PALM BEACH GARDENS FL 33410	

FILED Mar 26, 2015 Secretary of State CC9851114698

Certificate of Status Desired: Yes

03/26/2015 PRESIDENT

Date

Date