

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000090803

Entity Name: MY PLACE TRANSITIONAL LIVING, LLC

Current Principal Place of Business:

6601 NW 14 STREET
SUITE 3
PLANTATION, FL 33313

Current Mailing Address:

6601 NW 14 STREET
SUITE 3
PLANTATION, FL 33313

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIROCCO & COMPANY CPA PA
6601 NW 14 STREET
STE 3
PLANTATION, FL 33313 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 BKS ONE CORP
Address 6601 NW 14 STREET, STE 3
City-State-Zip: PLANTATION FL 33313

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: BRANDEN

MGR

01/17/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date