#### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000098036

Entity Name: SANTIAGO MENTAL HEALTH CENTER, LLC

FILED
Jan 06, 2024
Secretary of State
0130148917CC

## **Current Principal Place of Business:**

2931 NE 1ST DRIVE HOMESTEAD, FL 33033

# **Current Mailing Address:**

2931 NE 1ST DRIVE

HOMESTEAD, FL 33033 US

FEI Number: 46-4856912 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SANTIAGO-GUIA, RINA S PSYD 2931 NE 1ST DRIVE HOMESTEAD , FL 33033 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: RINA S SANTIAGO-GUIA, PSYD 01/06/2024

Electronic Signature of Registered Agent

Date

### Authorized Person(s) Detail:

Title MGR

Name SANTIAGO-GUIA, RINA S Address 2931 NE 1ST DRIVE City-State-Zip: HOMESTEAD FL 33033

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: RINA SHAILY SANTIAGO-GUIA

LICENSED PSYCHOLOGIST 01/06/2024