### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L13000115041

## Entity Name: BEHAVIORAL HEALTH SOLUTIONS OF TAMPA LLC

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

7444 LONG AVENUE SKOKIE, IL 60077

## **Current Mailing Address:**

7444 LONG AVENUE SKOKIE, IL 60077

# FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

VCORP SERVICES, LLC 5011 SOUTH STATE ROAD7 SUITE 106 DAVIE, FL 33314 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 :

TitleMGRNameSCHREIBER, ADAM JAddress7444 LONG AVENUECity-State-Zip:SKOKIE IL 60077

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

SIGNATURE: ADAM J. SCHREIBER

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 03, 2015 Secretary of State CC2206541553

Certificate of Status Desired: No

Date

04/03/2015 Date