

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000145607

Entity Name: LEARNING TOGETHER THERAPY SERVICES, LLC

Current Principal Place of Business:

8496 DORSEY STREET
SPRING HILL, FL 34608

Current Mailing Address:

8496 DORSEY STREET
SPRING HILL, FL 34608 US

FEI Number: 46-3883094

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OSSABA-QUIROZ, LAKSMY M
8496 DORSEY STREET
SPRING HILL, FL 34608 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 OSSABA QUIROZ, LAKSMY M
Address 8496 DORSEY STREET
City-State-Zip: SPRING HILL FL 34608

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: LAKSMY OSSABA QUIROZ

OWNER

03/19/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date