## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000084396

**Entity Name: SERENE THERAPIES LLC** 

**Current Principal Place of Business:** 

1525 S ALAFAYA TRAIL #102 ORLANDO, FL 32828

**FILED** Apr 22, 2019 **Secretary of State** 5869477980CC

## **Current Mailing Address:**

1525 S ALAFAYA TRAIL #102 ORLANDO, FL 32828 US

FEI Number: 47-4173060 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

POLO, JOCELYN 1525 S ALAFAYA TRAIL #102 ORLANDO, FL 32828 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:

102

Title MGR Title MGR

POLO, JOCELYN Name Name RAMIREZ, MELISSA 1525 S ALAFAYA TRAIL 1525 S ALAFAYA TRAIL Address Address

102

City-State-Zip: ORLANDO FL 32828 City-State-Zip: ORLANDO FL 32828

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.

Electronic Signature of Signing Authorized Person(s) Detail