

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000124714

Entity Name: 3 C'S THERAPY, LLC

Current Principal Place of Business:

3380 ROSE MALLOW LOOP
OVIEDO, FL 32766

Current Mailing Address:

3380 ROSE MALLOW LOOP
OVIEDO, FL 32766 US

FEI Number: 47-1574497

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEREDITH, CHRISTINE L
3380 ROSE MALLOW LOOP
OVIEDO, FL 32766 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 MGR
Name MEREDITH, CHRISTINE L
Address 3380 ROSE MALLOW LOOP
City-State-Zip: OVIEDO FL 32766

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: CHRISTINE MEREDITH

MANAGER

02/15/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date