#### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000159367

Entity Name: THERAPEUTIC CONNECTIONS LLC.

FILED
Mar 09, 2024
Secretary of State
2999982165CC

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

2078 US HWY 98 W SUITE 105 SANTA ROSA BEACH, FL 32459

## **Current Mailing Address:**

123 CHAPMAN STREET SANTA ROSA BEACH, FL 32459 US

FEI Number: 47-2048774 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DIMARCO AND ASSOCIATES, CPAS 220 PINE AVENUE NORTH OLDSMAR, FL 34677 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: ROBERT DIMARCO 03/09/2024

Electronic Signature of Registered Agent Date

# Authorized Person(s) Detail:

Title MANAGER

Name GARNER-HOUSTON, CAROL Address 123 CHAPMAN STREET

City-State-Zip: SANTA ROSA BEACH FL 32459

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: GARNER-HOUSTON, CAROL

MANAGER OWNER AUTHORIZED

03/09/2024