

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000025018

**Entity Name:** AREA OF EFFECT COUNSELING, PLLC

**Current Principal Place of Business:**

6127 METROWEST BLVD UNIT 110  
ORLANDO, FL 32835

**Current Mailing Address:**

3091 WOOLRIDGE DRIVE  
ORLANDO, FL 32837 US

**FEI Number:** 47-1162484

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KAUFMANN, DANIEL  
6127 METROWEST BLVD UNIT 110  
ORLANDO, FL 32835 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:** DANIEL KAUFMANN

02/15/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name KAUFMANN, DANIEL A  
Address 6127 METROWEST BLVD UNIT 110  
City-State-Zip: ORLANDO FL 32835

*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:** DANIEL KAUFMANN

OWNER

02/15/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date