2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 20, 2024
Secretary of State
5866097125CC

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Entity Name: ME TIME THERAPY LLC

Current Principal Place of Business:

20 LAKEPOINTE CIRCLE
KISSIMMEE, FL 34743

Current Mailing Address:

20 LAKEPOINTE CIRCLE
KISSIMMEE, FL 34743 US

FEI Number: 81-1295504

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARISOL , COLLAZO
20 LAKEPOINTE CIRCLE
KISSIMMEE, FL 34743 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: MARISOL COLLAZO 02/20/2024

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MANAGING MEMBER
Name	COLLAZO, MARISOL
Address	20 LAKEPOINTE CIRCLE
City-State-Zip:	KISSIMMEE FL 34743

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: MARISOL COLLAZO MANAGER 02/20/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date