

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000022022

Entity Name: PRIME PSYCHOLOGICAL SERVICES, LLC

Current Principal Place of Business:

7725 SW 115TH STREET
PINECREST, FL 33156

Current Mailing Address:

PO BOX 565473
PINECREST, FL 33256-5473 US

FEI Number: 81-1558106

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARRILLO, ROBERT
7725 SW 115TH STREET
PINECREST, FL 33156 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 AMBR
Name CARRILLO, ROBERT
Address PO BOX 565473
City-State-Zip: PINECREST FL 33256-5473

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: ROBERT CARRILLO

AMBR

03/05/2022

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date