

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000087706

Entity Name: SAIBLE NEUROPSYCHOLOGY LLC

Current Principal Place of Business:

360 CENTRAL AVENUE
SUITE 1230
SAINT PETERSBURG, FL 33701

Current Mailing Address:

360 CENTRAL AVENUE
SUITE 1230
SAINT PETERSBURG, FL 33701 US

FEI Number: 81-2680594

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAIBLE, SHIVANI
360 CENTRAL AVENUE
SUITE 1230
SAINT PETERSBURG, FL 33701 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 PRESIDENT
Name SAIBLE, SHIVANI
Address 644 BOCA CIEGA ISLE DRIVE
City-State-Zip: ST. PETE BEACH FL 33706

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: SHIVANI SAIBLE

OWNER

02/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date