

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000123398

Entity Name: SMITH SPEECH PATHOLOGY SERVICES, LLC

Current Principal Place of Business:

100 NORTH FEDERAL HWY
APT 621
FORT LAUDERDALE, FL 33301

Current Mailing Address:

100 NORTH FEDERAL HWY
APT 621
FORT LAUDERDALE, FL 33301

FEI Number: 82-1909700

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, DEANNA R
100 NORTH FEDERAL HWY.
APT. 621
FORT FORTLAUDERDALE, FL 33301 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 MANAGER
Name SMITH, DEANNA ROSE
Address 100 NORTH FEDERAL HWY
 APT 621
City-State-Zip: FORT LAUDERDALE FL 33301

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: DEANNA SMITH

03/02/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date