2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000130848

Entity Name: ABA ALLIANCE THERAPY, LLC

Current Principal Place of Business:

920 DELANEY AVENUE ORLANDO. FL 32806

Current Mailing Address:

920 DELANEY AVENUE ORLANDO, FL 32806 US

FEI Number: 81-3215556 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TARANTELLO, COREY 920 DELANEY AVENUE ORLANDO, FL 32806 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: COREY TARANTELLO 01/08/2024

Electronic Signature of Registered Agent

Date

FILED Jan 08, 2024

Secretary of State

7260373927CC

Authorized Person(s) Detail:

Title MGR Title MGR

Name EFZIL, HINA Name TARANTELLO, COREY S.

Address 438 WHIPPERWILL WAY Address PO BOX 1224

City-State-Zip: WINTER GARDEN FL 34787 City-State-Zip: GOTHA FL 34734

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: COREY TARANTELLO

Electronic Signature of Signing Authorized Person(s) Detail

MGR

01/08/2024