

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000231796

Entity Name: YOUTH THERAPY AND ASSESMENT, LLC

Current Principal Place of Business:

125 W. INDIANTOWN RD.
203-A
JUPITER, FL 33548

Current Mailing Address:

628 EASTWIND DR.
NORTH PALM BEACH, FL 33408

FEI Number: 81-4820541

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TERRELL, AMANDA E
628 EASTWIND DR
NORTH PALM BEACH, FL 33408 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: AMANDA E TERRELL

06/13/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name TERRELL, AMANDA E
Address 628 EASTWIND DR
City-State-Zip: NORTH PALM BEACH FL 33408

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: AMANDA TERRELL

REGISTERED AGENT

06/13/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date