

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000111845

Entity Name: BARBON BEHAV. THERAPY LLC

Current Principal Place of Business:

415 NW 85 PLACE
APT.8
MIAMI, FL 33126

Current Mailing Address:

415 NW 85 PLACE
APT.8
MIAMI, FL 33126 US

FEI Number: 82-1661226

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARBON, BEXIS MRS.
415 NW 85 PLACE
APT.8
MIAMI, FL 33126 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 MGR
Name BARBON, BEXIS MRS
Address 415 NW 85 PLACE APT.8
City-State-Zip: MIAMI FL 33126

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: BEXIS BARBON

MGR

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date