

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000131145

**Entity Name:** A1 BEHAVIOR THERAPIST LLC

**Current Principal Place of Business:**

742 NW 132TH AVE  
PLANTATION, FL 33325

**Current Mailing Address:**

742 NW 132TH AVE  
PLANTATION, FL 33325

**FEI Number:** 82-1918120

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ALVAREZ, GABRIEL J  
742 NW 132TH AVE  
PLANTATION, FL 33325 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	Title	MGR
Name	ALVAREZ, GABRIEL J	Name	POLANCO, MARIA C
Address	742 NW 132TH AVE	Address	742 NW 132TH AVE
City-State-Zip:	PLANTATION FL 33325	City-State-Zip:	PLANTATION FL 33325

*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:** GABRIEL ALVAREZ

**MGR**

**05/24/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date