

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000221412

Entity Name: STUART FAMILY THERAPY, LLC

Current Principal Place of Business:

3141 SE FAIRWAY WEST
STUART, FL 34997

Current Mailing Address:

3141 SE FAIRWAY WEST
STUART, FL 34997 US

FEI Number: 82-3354125

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MUMCU, KAREN LINDSAY LMFT
3141 SE FAIRWAY WEST
STUART, FL 34997 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: KAREN LINDSAY MUMCU

03/15/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MUMCU, KAREN LINDSAY LMFT
Address 3141 SE FAIRWAY WEST
City-State-Zip: STUART FL 34997

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: MUMCU , KAREN LINDSAY , LMFT

MANAGER

03/15/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date