

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000235063

Entity Name: SERENITY LANDING THERAPY, LLC

Current Principal Place of Business:

8443 N OAK RIVER WAY
HERNANDO, FL 34442

Current Mailing Address:

2339 SABASTIAN STREET
MOUNT DORA, FL 32757 US

FEI Number: 82-3424728

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NICCOLLS, SHAWN M
2339 SABASTIAN STREET
MOUNT DORA, FL 32757 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 AMBR
Name NICCOLLS, SHAWN M
Address 2339 SABASTIAN STREET
City-State-Zip: MOUNT DORA FL 32757

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: SHAWN M. NICCOLLS

AMBR

07/02/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date