

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000202426

Entity Name: INTEGRATIVE SPEECH & RESPITE SERVICES, LLC

Current Principal Place of Business:

6911 PROCTOR RD
SARASOTA, FL 34241

Current Mailing Address:

6911 PROCTOR RD
SARASOTA, FL 34241 US

FEI Number: 83-1686253

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST 4TH FLOOR
MIAMI, FL 33145 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 BLOOM, HALI
Address 6911 PROCTOR RD
City-State-Zip: SARASOTA FL 34241

Title MGR
Name BLOOM, MICHAEL
Address 6911 PROCTOR RD
City-State-Zip: SARASOTA FL 34241

Title S
Name BLOOM, HALI
Address 6911 PROCTOR RD
City-State-Zip: SARASOTA FL 34241

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: HALI BLOOM

MGR

03/31/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date