## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000095382

**Entity Name: GOLDEN LIGHT THERAPY PLLC** 

**Current Principal Place of Business:** 

542 NW 8TH STREET #10 MIAMI, FL 33136

**Current Mailing Address:** 

542 NW 8TH STREET #10 MIAMI, FL 33136 US

FEI Number: 83-4404388 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 5575 S. SEMORAN BLVD SUITE 36 ORLANDO, FL 32822 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

**FILED** Apr 28, 2022

**Secretary of State** 

0802670776CC

## Authorized Person(s) Detail:

**AMBR** Title

SANTIAGO, LIDIA L Name

Address 542 NW 8TH STREET #10

City-State-Zip: MIAMI FL 33136

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.

**MANAGER** 

Electronic Signature of Signing Authorized Person(s) Detail