

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000214356

**Entity Name:** COGNITIVE BEHAVIORAL COACHING, LLC

**Current Principal Place of Business:**

5401 S KIRKMAN  
495  
ORLANDO, FL 32819

**Current Mailing Address:**

5401 S KIRKMAN  
495  
ORLANDO, FL 32819 US

**FEI Number:** 84-2907797

**Certificate of Status Desired:** No

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

LEGIT CONSULTING SERVICES, LLC  
6735 CONROY WINDERMERE RD  
233  
ORLANDO, FL 32835 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            MARQUES ROBALLO, ANDREA G  
Address        5401 S KIRKMAN 495  
City-State-Zip: ORLANDO FL 32819

*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:** MARQUES ROBALLO, ANDREA G

AMBR

06/17/2020

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

\_\_\_\_\_  
Date