

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000125554

**Entity Name:** COUPLES THERAPY MIAMI LLC

**Current Principal Place of Business:**

2906 S. DOUGLAS RD  
SUITE 202  
MIAMI, FL 33134

**Current Mailing Address:**

2906 S. DOUGLAS ROAD  
SUITE 202  
MIAMI, FL 33135 US

**FEI Number:** 85-1187725

**Certificate of Status Desired:** No

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

RODICH, COURTNIIE I  
17921 SW 4TH CT  
PEMBROKE PINES, FL 33029 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 RODICH, COURTNIIE I  
Address 17921 SW 4TH CT  
City-State-Zip: PEMBROKE PINES FL 33029

*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:** COURTNIIE RODICH

**MANAGER**

**01/30/2024**

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

\_\_\_\_\_  
Date