# 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000269972

#### Entity Name: AH ABA THERAPY LLC

#### **Current Principal Place of Business:**

16657 SW 81 TER MIAMI, FL 33193

### **Current Mailing Address:**

16657 SW 81 TER MIAMI, FL 33193 US

# FEI Number: 85-3110404

### Name and Address of Current Registered Agent:

HERRERA, ANDY SR 16657 SW 81 TER MIAMI, FL 33193 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

## Authorized Person(s) Detail :

Title MGR Name HERRERA, ANDY SR Address 16657 SW 81 TER City-State-Zip: MIAMI FL 33193

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: ANDY HERRERA

PRESIDENT

02/17/2023

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

# FILED Feb 17, 2023 Secretary of State 7641240982CC

Date