

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000285679

**Entity Name:** OFM MENTAL HEALTH, LLC

**Current Principal Place of Business:**

14562 SW 280TH ST  
#107  
HOMESTEAD, FL 33032

**Current Mailing Address:**

14562 SW 280TH ST  
#107  
HOMESTEAD, FL 33032 US

**FEI Number:** 85-3105487

**Certificate of Status Desired:** No

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

REBOLTA CORPORATION, INC  
800 N FLAGLER AVE  
SUITE 4  
HOMESTEAD, FL 33030 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:** NELLY REBOLTA

02/16/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name FERNANDEZ MARTINEZ, OVIDIO  
Address 14562 SW 280TH ST  
#107  
City-State-Zip: HOMESTEAD FL 33032

Title MGR  
Name ALVAREZ CALVO, BEATRIZ  
Address 14562 SW 280TH ST  
#107  
City-State-Zip: HOMESTEAD FL 33032

*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:** FERNANDEZ MARTINEZ OVIDIO

AMBR

02/16/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date