

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000335476

Entity Name: ABA FAMILY THERAPY, LLC

Current Principal Place of Business:

10426 CHORLTON CIRCLE
ORLANDO, FL 32832

Current Mailing Address:

10426 CHORLTON CIRCLE
ORLANDO, FL 32832 US

FEI Number: 85-3720984

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERRER, ALEXIS M
10426 CHORLTON CIRCLE
ORLANDO, FLORIDA, FL 32832 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	Title	MGR
Name	FERRER, ALEXIS M.	Name	VERDON, MATHEW
Address	10426 CHORLTON CIRCLE	Address	10426 CHORLTON CIRCLE
City-State-Zip:	ORLANDO FL 32832	City-State-Zip:	ORLANDO FL 32832

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: ALEXIS FERRER PIRAN BASUALDO

AMBR

01/04/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date