

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000374559

Entity Name: BLOOM SPEECH AND LANGUAGE THERAPY LLC

Current Principal Place of Business:

704 GOODLETTE-FRANK RD NORTH
SUITE 203
NAPLES, FL 34102

Current Mailing Address:

7436 INSPIRA LN
2-106
NAPLES, FL 34113 US

FEI Number: 87-3179173

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PENN, VICTORIA M
7436 INSPIRA LN
2-106
NAPLES, FL 34113 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 PENN, VICTORIA
Address 7436 INSPIRA LN
 2-106
City-State-Zip: NAPLES FL 34113

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: VICTORIA M. PENN

CEO

04/24/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date