#### 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000033140

Entity Name: THERAPEUTIC TREEHOUSE, LLC

Jan 04, 2023 Secretary of State 0562590580CC

**FILED** 

# **Current Principal Place of Business:**

15217 SOUTH TRANQUILITY LAKE DRIVE

DELRAY BEACH, FL 33446

## **Current Mailing Address:**

15217 SOUTH TRANQUILITY LAKE DRIVE DELRAY BEACH, FL 33446 US

FEI Number: 86-1943563 Certificate of Status Desired: Yes

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

FAMULARO, AMANDA 15217 SOUTH TRANQUILITY LAKE DRIVE DELRAY BEACH, FL 33446 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 Title

 Name
 FAMULARO, AMANDA
 Name
 TAYLOR, STEPHANIE

 Address
 15217 SOUTH TRANQUILITY LAKE
 Address
 6176 NW 20TH COURT

City-State-Zip: DELRAY BEACH FL 33446

City-State-Zip: MARGATE FL 33063

MGR

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: AMANDA FAMULARO

Electronic Signature of Signing Authorized Person(s) Detail

**OWNER** 

01/04/2023