

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000271837

Entity Name: GENESIS BEHAVIORAL THERAPY LLC

Current Principal Place of Business:

11818 SW 273RD LN
HOMESTEAD , FL 33032

Current Mailing Address:

11818 SW 273RD LN
HOMESTEAD , FL 33032 US

FEI Number: 87-1147072

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARRILLO GONZALEZ, GISELLE
11818 SW 273RD LN
HOMESTEAD , FL 33032 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
Name CARRILLO GONZALEZ, GISELLE
Address 11818 SW 273RD LN
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: GISELLE CARRILLO GONZALEZ _____

04/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date