

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000022886

**Entity Name:** THE COUNSELING AND THERAPY CENTER LLC

**Current Principal Place of Business:**

2100 CORAL WAY  
STE 702  
MIAMI, FL 33145

**Current Mailing Address:**

2100 CORAL WAY  
STE 702  
MIAMI, FL 33145 US

**FEI Number:** 87-4662555

**Certificate of Status Desired:** No

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

DJEBELLI TORRES PLLC  
2100 CORAL WAY  
STE 701  
MIAMI, FL 33145 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:** DAVID DJEBELLI

08/31/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name FUENTES, MICHELL C MGRM  
Address 2100 CORAL WAY STE 702  
City-State-Zip: MIAMI FL 33145

*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:** MICHELL FUENTES

MGRM

08/31/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date