

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000057995

Entity Name: ALLAY BEHAVIORAL THERAPY, LLC

Current Principal Place of Business:

1750 TREE BLVD, SUITE 6
ST AUGUSTINE, FL 32084

Current Mailing Address:

1750 TREE BLVD
STE 6
ST. AUGUSTINE, FL 32084 UN

FEI Number: 88-0732010

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILKERSON, RYAN M
70 GYPSUM PL
ST AUGUSTINE, FL 32086 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 WILKERSON, RYAN M
Address 70 GYPSUM PL
City-State-Zip: ST. AUGUSTINE FL 32086

Title AMBR
Name BATES, ALYSSA R
Address 936 SCHEIDEL WAY
City-State-Zip: ST. AUGUSTINE FL 32084

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: RYAN WILKERSON

02/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date