#### 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000058425

Entity Name: ADAPTIVE BEHAVIORAL HEALTH LLC

FILED
Apr 26, 2025
Secretary of State
5047530358CC

## **Current Principal Place of Business:**

4083 US HIGHWAY 1 SUITE 102B ROCKLEDGE, FL 32955

# **Current Mailing Address:**

4083 US HIGHWAY 1 SUITE 102B ROCKLEDGE, FL 32955 US

FEI Number: 88-1476241 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

CARVIL, PATRICIA 2903 WEST NEW HAVEN AVE UNIT 551 WEST MELBOURNE, FL 32904 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: PATRICIA CARVIL 04/26/2025

Electronic Signature of Registered Agent Date

### Authorized Person(s) Detail:

Title MGR

Name CARVIL, PATRICIA Address 4083 US HIGHWAY 1

SUITE 102B

City-State-Zip: ROCKLEDGE FL 32955

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: PATRICIA CARVIL MANAGER 04/26/2025