

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000355799

Entity Name: ALIGN PSYCHIATRY AND WELLNESS LLC

Current Principal Place of Business:

1563 CAPITAL CIRCLE SE
PMB 301
TALLAHASSEE, FL 32301

Current Mailing Address:

1563 CAPITAL CIRCLE SE
PMB 301
TALLAHASSEE, FL 32301

FEI Number: 88-3713510

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GILLON, CANISHA
1604 COREY WOOD CIRCLE
TALLAHASSEE,, FL 32304 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 CEO
Name GILLON, CANISHA
Address 1604 COREY WOOD CIRCLE
City-State-Zip: TALLAHASSEE FL 32304

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: CANISHA GILLON

04/28/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date