

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000362290

Entity Name: SELF CARE THERAPY & COACHING CENTER LLC

Current Principal Place of Business:

2114 N FLAMINGO RD. #827
PEMBROKE PINES, FL 33028

Current Mailing Address:

2114 N FLAMINGO RD. #827
PEMBROKE PINES, FL 33028 US

FEI Number: 88-3821382

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AVRIL, SHAVONNE C
2114 N FLAMINGO RD.
#827
PEMBROKE PINES, FL 33028 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: SHAVONNE AVRIL

03/04/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CEO
Name AVRIL, SHAVONNE C
Address 2114 N FLAMINGO RD.
 #827
City-State-Zip: PEMBROKE PINES FL 33028

Title MGR
Name BURLEY, EARLINE
Address 2114 N FLAMINGO RD. #827
City-State-Zip: PEMBROKE PINES FL 33028

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: SHAVONNE AVRIL

CEO

03/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date