

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000371976

Entity Name: SMILES THERAPY SERVICES LLC

Current Principal Place of Business:

1324 BARRINGTON DR
WEST PALM BEACH, FL 33406

Current Mailing Address:

1324 BARRINGTON DR
WEST PALM BEACH, FL 33406

FEI Number: 88-3853054

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOSCOSO DIAZ, AMANDA
1324 BARRINGTON DR
WEST PALM BEACH, FL 33406 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: AMANDA MOSCOSO DIAZ

04/14/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MOSCOSO DIAZ, AMANDA
Address 1324 BARRINGTON
City-State-Zip: WEST PALM BEACH FL 33406

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: AMANDA MOSCOSO DIAZ

MGR

04/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date