## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000408102

Entity Name: CLEAR PSYCHIATRY PLLC

**Current Principal Place of Business:** 

3202 N. HOWARD AVE., SUITE 1

TAMPA, FL 33607

**Current Mailing Address:** 

3202 N. HOWARD AVE., SUITE 1 TAMPA. FL 33607

FEI Number: 92-0402387 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOMSI LAW, P.A. 8815 CONROY-WINDERMERE ROAD #402 ORLANDO, FL 32835 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

FILED Mar 15, 2024

**Secretary of State** 

0816158548CC

## Authorized Person(s) Detail:

Title MGR

Name IFEOMA OKPALEKE

Address 3202 N. HOWARD AVE., SUITE 1

City-State-Zip: TAMPA FL 33607

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: IFEOMA OKPALEKE

**OPERATING MANAGER** 

03/15/2024