

**2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L22000410467

**Entity Name:** YANI TRUST THERAPY LLC

**Current Principal Place of Business:**

4201 3RD ST SW  
LEHIGH ACRES, FL 33976

**Current Mailing Address:**

4201 3RD ST SW  
LEHIGH ACRES, FL 33976 US

**FEI Number: 88-4188615**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TORRES HEREDIA, YANIESKA  
4201 3RD ST SW  
LEHIGH ACRES, FL 33976 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 P  
Name TORRES HEREDIA, YANIESKA  
Address 4201 3RD ST SW  
City-State-Zip: LEHIGH ACRES FL 33976

*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:** YANIESKA TORRES HEREDIA

**OWNER**

**10/02/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date