

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000465877

**Entity Name:** SOLUTION BEHAVIORAL HEALTH CONSULTING GROUP LLC

**Current Principal Place of Business:**

101 SW 62 TERR  
PLANTATION, FL 33317

**Current Mailing Address:**

101 SW 62 TERR  
PLANTATION, FL 33317 UN

**FEI Number: 88-4236903**

**Certificate of Status Desired: Yes**

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

ENGLISH-ARTERBERRY, B. MARIE  
101 SW 62 TERR  
PLANTATION, FL 33317 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	AMBR	Title	AMBR
Name	ENGLISH-ARTERBERRY, B. MARIE	Name	ARTERBERRY, ERNEST
Address	101 SW 62 TERR	Address	101 SW 62 TERR
City-State-Zip:	PLANTATION FL 33314	City-State-Zip:	PLANTATION FL 33314

*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: ARTERBERRY, ERNEST**

**AMBR**

**02/23/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date