## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000136627

Entity Name: DOLORES DEGIACOMO LCSW LLC

**Current Principal Place of Business:** 

2129 AITKIN LOOP LEESBURG, FL 34748

**Current Mailing Address:** 

2129 AITKIN LOOP LEESBURG, FL 34748

FEI Number: 92-3141293 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DEGIACOMO, DOLORES 2129 AITKIN LOOP LEESBURG, FL 34748 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 Feb 05, 2024

**Secretary of State** 

8940084157CC

## Authorized Person(s) Detail:

Title AR

Name DEGIACOMO, DOLORES

Address 2129 AITKIN LOOP

City-State-Zip: LEESBURG FL 34748

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: DOLORES A DEGIACOMO

**OWNER** 

02/05/2024