

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000512802

Entity Name: BETTEN TRANSFORMATIVE THERAPY, LLC

Current Principal Place of Business:

532 101ST AVE N
NAPLES, FL 34108

Current Mailing Address:

532 101ST AVE N
NAPLES, FL 34108

FEI Number: 93-4441558

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BETTEN, JESSICA J
532 101ST AVE N
NAPLES, FL 34108 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 MGR
Name BETTEN, JESSICA J
Address 532 101ST AVE N
City-State-Zip: NAPLES FL 34108

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: JESSICA BETTEN

MGR

02/02/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date