

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004429

Entity Name: COMMUNITY COUNSELLING SERVICE CO., LLC

Current Principal Place of Business:

527 MADISON AVENUE, 5TH FLOOR
NEW YORK, NY 10022

Current Mailing Address:

527 MADISON AVENUE, 5TH FLOOR
NEW YORK, NY 10022 US

FEI Number: 90-0286107

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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 MANAGING MEMBER
Name NEVINS, BRIAN
Address 527 MADISON AVENUE, 5TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGING MEMBER
Name MICHAUD, CHARLES
Address 527 MADISON AVENUE, 5TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGING MEMBER
Name LOONEY, CHRISTOPHER
Address 527 MADISON AVENUE, 5TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGING MEMBER
Name JAVIER, ERIC
Address 527 MADISON AVENUE, 5TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGING MEMBER
Name HAPPY, FREDERIC
Address 527 MADISON AVENUE, 5TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGING MEMBER
Name KANE, JONATHAN
Address 527 MADISON AVENUE, 5TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGING MEMBER
Name HOSKOW, PETER
Address 527 MADISON AVENUE, 5TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGING MEMBER
Name HAPPY, RAYMOND
Address 527 MADISON AVENUE, 5TH FLOOR
City-State-Zip: NEW YORK NY 10022

Continues on page 2

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: JONATHAN KANE

MANAGING MEMBER

01/23/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MANAGING MEMBER
Name KISSANE, ROBERT
Address 527 MADISON AVENUE, 5TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGING MEMBER
Name RIC, ROBERT
Address 527 MADISON AVENUE, 5TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title MANAGING MEMBER
Name KISSANE, THOMAS
Address 527 MADISON AVENUE, 5TH FLOOR
City-State-Zip: NEW YORK NY 10022