

**2018 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:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	PRESIDENT	Title	MGR
Name	KANE, JONATHAN	Name	KISSANE, ROBERT
Address	527 MADISON AVENUE, 5TH FLOOR	Address	527 MADISON AVENUE, 5TH FLOOR
City-State-Zip:	NEW YORK NY 10022	City-State-Zip:	NEW YORK NY 10022

*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

**PRESIDENT**

**03/16/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date