

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000005990

Entity Name: CLOSE COUNSELING, LLC

**FILED**  
**Feb 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6521 ORANGE DR.  
DAVIE, FL 33314

**New Principal Place of Business:**

**Current Mailing Address:**

20757 NW 9TH CT.,  
APT 107  
MIAMI GARDENS, FL 33169

**New Mailing Address:**

FEI Number: 20-8263197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CLOSE, LINDA C  
20757 N.E. 9TH CT  
APT. 107  
MIAMI GARDENS, FL 33169 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CLOSE, LINDA C  
Address: 20757 NW 9TH CT., APT. 107  
City-St-Zip: MIAMI GARDENS, FL 33169

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: LINDA C. CLOSE

MGRM

02/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date