

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000013474

FILED
Apr 30, 2009
Secretary of State

Entity Name: SERAPHIM THERAPEUTIC ADULT DAY CARE, LLC

Current Principal Place of Business:

638 NE 83RD TER
1, 2, 3, 4
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

651 NE 83RD STREET
MIAMI, FL 33138

New Mailing Address:

FEI Number: 34-2019467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAYEN, JULIETTE M
651 NE 83RD STREET
MIAMI, FL 33138 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ADM () Change (X) Addition
Name: PAYEN, JULIETTE M
Address: 638 NE 83 TER., #4
City-St-Zip: MIAMI, FL 33138

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JULIETTE PAYEN

ADM

04/30/2009

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