

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000088292

FILED
Mar 21, 2011
Secretary of State

Entity Name: TALK THERAPY, LLC

Current Principal Place of Business:

309 GOLDEN DEWDROP WAY
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

309 GOLDEN DEWDROP WAY
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 30-0644682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JABLONSKI, TARA L
309 GOLDEN DEWDROP WAY
OVIEDO, FL 32765 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: JABLONSKI, TARA L
Address: 309 GOLDEN DEWDROP WAY
City-St-Zip: OVIEDO, FL 32765

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: TARA JABLONSKI

MGRM

03/21/2011

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