

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000022325

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** BEHAVIORAL AID SOLUTIONS LLC

**Current Principal Place of Business:**

8340 SW 105 ST  
MIAMI, FL 33156 US

**New Principal Place of Business:**

**Current Mailing Address:**

8340 SW 105 ST  
MIAMI, FL 33156 US

**New Mailing Address:**

FEI Number: 27-5079221

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PALOMINO, MARIAELENA  
8340 SW 105 ST  
MIAMI, FL 33156 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: PALOMINO, MARIAELENA  
Address: 8340 SW 105 ST  
City-St-Zip: MIAMI, FL 33156 US

Title: MGRM  
Name: MACEDA, JORGE L  
Address: 3675 N COUNTRY CLUB DR, APT. 2107  
City-St-Zip: AVENTURA, FL 33180

Title: MGRM  
Name: CLEMENT, DAMARYS  
Address: 340 MADEIRA AVE, APT. 1  
City-St-Zip: CORAL GABLES, FL 33134

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: DAMARYS CLEMENT

MGRM

01/06/2012

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