

2021 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P20000028771

Entity Name: CASAS ADULT THERAPY CORP

Current Principal Place of Business:

1504 BAY ROAD
APT 812
MIAMI BEACH, FL 33139

Current Mailing Address:

1504 BAY ROAD
APT 812
MIAMI BEACH, FL 33139 US

FEI Number: 85-0684415

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASAS DIAZ, ADRIANA D
629 LENOX AVE
APT 2
MIAMI BEACH, FL 33139 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: ADRIANA CASAS DIAZ

09/28/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name CASAS DIAZ, ADRIANA D
Address 629 LENOX AVE APT 2
City-State-Zip: MIAMI BEACH FL 33139

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ADRIANA D CASAS DIAZ

OWNER

09/28/2021

Electronic Signature of Signing Officer/Director Detail

Date