## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000005990

Entity Name: CLOSE COUNSELING, LLC

**Current Principal Place of Business:** 

6521 ORANGE DR. DAVIE, FL 33314

## **Current Mailing Address:**

4611 S. UNIVERSITY DR.

#153

DAVIE. FL 33328 US

FEI Number: 20-8263197 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CLOSE, LINDA C 4611 S. UNIVERSITY DR. #153 DAVIE, FL 33328 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:

Electronic Signature of Registered Agent

Date

**FILED** Jan 13, 2015

**Secretary of State** 

CC7120278676

## Authorized Person(s) Detail:

Title **MGRM** 

CLOSE, LINDA C Name

Address 4611 S. UNIVERSITY DR.

#153

SIGNATURE: LINDA C CLOSE

City-State-Zip: DAVIE FL 33328

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER/OWNER

01/13/2015

Date