2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2017
Secretary of State
CC0230668676

DOCUMENT# L08000089680

Entity Name: BRIANNE TOOLE PSYCHOTHERAPY LLC

Current Principal Place of Business:

1415 PANTHER LANE
SUITE 243
NAPLES, FL 34109

Current Mailing Address:

5171 ITALIA CT.
AVE MARIA, FL 34142 US

FEI Number: 26-3396049

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOOLE, BRIANNE K
5171 ITALIA CT.
AVE MARIA, FL 34142 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

Authorized Person(s) Detail :

Title	MGR
Name	TOOLE, BRIANNE K
Address	5171 ITALIA CT
City-State-Zip:	AVE MARIA FL 34142

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.

SIGNATURE: BRIANNE K. TOOLE OWNER 01/08/2017

Electronic Signature of Signing Authorized Person(s) Detail — Date