

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000091117

**Entity Name:** PSYCHOTHERAPY OF THE PALM BEACHES, PLLC

**Current Principal Place of Business:**

11730 ST. ANDREWS PLACE  
APT 103  
WELLINGTON, FL 33414

**Current Mailing Address:**

11730 ST. ANDREWS PLACE  
APT 103  
WELLINGTON, FL 33414 US

**FEI Number:** 45-2963436

**Certificate of Status Desired:** No

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

SINGER, JORDANA  
11730 ST. ANDREWS PLACE  
APT 103  
WELLINGTON, FL 33414 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:** JORDANA SINGER

01/12/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SINGER, JORDANA  
Address 11730 ST. ANDREWS PLACE  
APT 103  
City-State-Zip: WELLINGTON FL 33414

*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:** JORDANA SINGER

MGRM

01/12/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date