

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000160483

Entity Name: REVERESCO ABA THERAPY, LLC

Current Principal Place of Business:

911 E. ATLANTIC BLVD.
SUITE 108-A
POMPANO BEACH, FL 33060

Current Mailing Address:

911 E. ATLANTIC BLVD.
SUITE 108-A
POMPANO BEACH, FL 33060 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMMARATA, MARIA
911 E. ATLANTIC BLVD.
SUITE 108-A
POMPANO BEACH, FL 33060 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 CAMMARATA, MARIA
Address 911 E. ATLANTIC BLVD., STE. 108-A
City-State-Zip: POMPAN BEACH FL 33060

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: MARIA CAMMARATA

MGR

04/21/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date