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: HEATHER R. VIOLANTE

MGR

Electronic Signature of Signing Authorized Person(s) Detail

#### 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: HEATHER R. VIOLANTE 01/13/2021 Electronic Signature of Registered Agent ( ) **D** ( ) ... . ם ה

Authorized Person(s) Detail :					
	Title	MGR	Title	MGR	
	Name	VIOLANTE, HEATHER R	Name	VIOLANTE, JONAH	
	Address	2419 E. COMMERCIAL BLVD., STE 203	Address	2419 E. COMMERCIAL BLVD., SUITE 203	
	City-State-Zip:	FORT LAUDERDALE FL 33308	City-State-Zip:	FORT LAUDERDALE FL 33308	

#### 2419 E. COMMERCIAL BLVD. SUITE 203

SUITE 203

## Name and Address of Current Registered Agent:

FEI Number: 46-1733808

VIOLANTE, HEATHER R

FORT LAUDERDALE, FL 33308 US

# 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L13000002477

## Entity Name: SERENITY LANE PSYCHOLOGICAL SERVICES, LLC

# **Current Principal Place of Business:**

2419 E. COMMERCIAL BLVD. SUITE 203 FORT LAUDERDALE, FL 33308

#### **Current Mailing Address:**

2419 E. COMMERCIAL BLVD. FORT LAUDERDALE, FL 33308 US

Certificate of Status Desired: No

FILED Jan 13, 2021 Secretary of State 9627519358CC

> 01/13/2021 Date

Date