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.

OWNER

SIGNATURE: JAMIE-ANN U. TEDTAOTAO, LMHC

Electronic Signature of Signing Authorized Person(s) Detail

Name and Address of Current Registered Agent:

TEDTAOTAO, JAMIE-ANN U LMHC, MS, NCC 1303 MOSLEY DR LYNN HAVEN, FL 32444 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: JAMIE-ANN U. TEDTAOTAO

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

TitleMGRNameTEDTAOTAO, JAMIE-ANN U LMHCAddress117 OAKRIDGE PLACECity-State-Zip:PANAMA CITY BEACH FL 32408

2408

Certificate of Status Desired: No

01/28/2024 Date

FILED Jan 28, 2024 Secretary of State 0729307429CC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000090370

Entity Name: JAMIE-ANN U. TEDTAOTAO COUNSELING SERVICES, LLC

Current Principal Place of Business:

1303 MOSLEY DR LYNN HAVEN, FL 32444

Current Mailing Address:

1303 MOSLEY DR LYNN HAVEN, FL 32444 US

FEI Number: NOT APPLICABLE

01/28/2024 Date