

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000063219

**Entity Name:** UNDERSTAND BEHAVIOR, LLC

**Current Principal Place of Business:**

9872 N DAVIS HWY #2  
#2  
PENSACOLA , FL 32514

**Current Mailing Address:**

PO BOX 10850  
PENSACOLA, FL 32524

**FEI Number: 46-5433352**

**Certificate of Status Desired:** No

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

BARRY, LEASHA M  
9872 N DAVIS HWY #2  
#2  
PENSACOLA , FL 32514 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            AMBR  
Name            BARRY, LEASHA M  
Address        9872 N DAVIS HWY #2  
                  #2  
City-State-Zip: PENSACOLA FL 32514

*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: LEASHA M BARRY** \_\_\_\_\_

**OWNER**

**04/23/2016**

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date