

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000088092

**Entity Name:** SUSANA Q MARIKLE, PSY.D., LLC

**Current Principal Place of Business:**

9555 FRANGIPANI DRIVE  
VERO BEACH, FL 32963

**Current Mailing Address:**

9555 FRANGIPANI DRIVE  
VERO BEACH, FL 32963

**FEI Number:** 47-1355947

**Certificate of Status Desired:** Yes

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

MARIKLE, SUSANA PSY.D.  
9555 FRANGIPANI DRIVE  
VERO BEACH, FL 32963 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 MARIKLE, SUSANA PSY.D  
Address 9555 FRANGIPANI DRIVE  
City-State-Zip: VERO BEACH FL 32963

*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:** SUSANA MARIKLE, PSYD

MGR

03/04/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date