

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000148467

Entity Name: PSYCHOLOGICAL RESOURCE AND ASSESSMENT CENTER,
L.L.C.

Current Principal Place of Business:

7720 MINDELLO STREET
CORAL GABLES, FL 33143-6256

Current Mailing Address:

7720 MINDELLO STREET
CORAL GABLES, FL 33143-6256

FEI Number: NOT APPLICABLE

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 JIMENEZ, GIHANNA B DR.
Address 7720 MINDELLO STREET
City-State-Zip: CORAL GABLES FL 33143-6256

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: GIHANNA JIMENEZ

DR.

04/28/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date