

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000073431

Entity Name: HAKUNA MATATA PSYCHIATRY, PLLC

Current Principal Place of Business:

253 WOODBRIAR DR.
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

127 W.FAIRBARKS AVE
PMB#526
WINTER PARK, FL 32789 US

FEI Number: 81-2327335

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202 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: ERIK TREUTLEIN, US CORP. AGENTS

02/21/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name PICHARDO, LIBANESSA
Address 13123 EAST EMERALD COAST PKWY
City-State-Zip: INLET BEACH FL 32461

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: LIBANESSA PICHARDO

AMBR

02/21/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date