

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000163902

**Entity Name:** PSYCHO STUDIO LLC

**Current Principal Place of Business:**

701 NW 105TH TERRACE  
PEMBROKE PINES, FL 33026

**Current Mailing Address:**

701 NW 105TH TERRACE  
PEMBROKE PINES, FL 33026 US

**FEI Number: 81-3812089**

**Certificate of Status Desired: No**

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

YORIS, ORLANDO  
701 NW 105TH TERRACE  
PEMBROKE PINES, FL 33026 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 YORIS, ORLANDO  
Address 701 NW 105TH TERRACE  
City-State-Zip: PEMBROKE PINES FL 33026

Title AMBR  
Name YORIS, EDUARDO  
Address 701 NW 105TH TERRACE  
City-State-Zip: PEMBROKE PINES FL 33026

*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: ORLANDO YORIS**

**AMBR**

**04/20/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date