

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000193662

Entity Name: TEACH ME TO EAT: THERAPISTS TEACHING THERAPISTS, LLC

Current Principal Place of Business:

10604 PEBBLE COVE LANE
BOCA RATON, FL 33498

Current Mailing Address:

10604 PEBBLE COVE LANE
BOCA RATON, FL 33498

FEI Number: 81-4716266

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

THOMAS, TAYLOR
5341 NW 49TH AVENUE
COCONUT CREEK, FL 33073 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 ALIFANO, ANDREA
Address 10604 PEBBLE COVE LANE
City-State-Zip: BOCA RATON FL 33498

Title AMBR
Name THOMAS, TAYLOR
Address 5341 NW 49TH AVENUE
City-State-Zip: COCONUT CREEK FL 33073

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: TAYLOR THOMAS

PARTNER/MEMBER

03/19/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date