## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L16000213850 Entity Name: LOTHMAN PSYCHOTHERAPY AND CONSULTATION SERVICES LLC Current Principal Place of Business: 3734 SAN VISCAYA DRIVE

**Current Mailing Address:** 

JACKSONVILLE, FL 32217

3734 SAN VISCAYA DRIVE JACKSONVILLE, FL 32217

FEI Number: 81-4485678

## Name and Address of Current Registered Agent:

LOTHMAN, LOUIS R 3734 SAN VISCAYA DRIVE JACKSONVILLE, FL 32217 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

## Authorized Person(s) Detail :

Title	AMBR
Name	LOTHMAN, LOUIS R
Address	3734 SAN VISCAYA DRIVE
City-State-Zip:	JACKSONVILLE FL 32217

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: LOUIS R. LOTHMAN

PRESIDENT

01/10/2023 Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Jan 10, 2023 Secretary of State 1440300862CC

Certificate of Status Desired: Yes