

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000007001

Entity Name: SAHA PSYCHIATRIC CONSULTANTS LLC

Current Principal Place of Business:

20423 STATE RD. 7, STE. F6-271
BOCA RATON, FL 33498

Current Mailing Address:

20423 STATE RD. 7, STE. F6-271
BOCA RATON, FL 33498

FEI Number: 81-4975496

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
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 PHILLIPS, OMOLARA
Address 20423 STATE RD. 7, STE. F6-271
City-State-Zip: BOCA RATON FL 33498

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: OMOLARA PHILLIPS

MGR

09/17/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date