2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2025
Secretary of State
5993700622CC

DOCUMENT# L18000026771

Entity Name: LIVING STREAMS COUNSELING LLC

Current Principal Place of Business:

2290 10TH AVENUE N
SUITE 404
LAKE WORTH, FL 33461

Current Mailing Address:

2290 10TH AVENUE N
SUITE 404
LAKE WORTH, FL 33461 US

FEI Number: 26-4366997

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ACOSTA, RAFAEL DR.
2290 10TH AVENUE N
SUITE 404
LAKE WORTH, FL 33461 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: /S/ RAFAEL ACOSTA, ED.D. 04/21/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MANAGER	Title	AUTHORIZED REPRESENTATIVE
Name	ACOSTA, RAFAEL DR.	Name	ACOSTA, BETH DR.
Address	2290 10TH AVENUE N SUITE 404	Address	2290 10TH AVENUE N SUITE 404
City-State-Zip:	LAKE WORTH FL 33461	City-State-Zip:	LAKE WORTH FL 33461

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: /S/ DR. RAFAEL ACOSTA MGR 04/21/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date