

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000105200

Entity Name: SQUARE PEGS BEHAVIOR SOLUTIONS, LLC

Current Principal Place of Business:

904 FLOWER AVE.
PANAMA CITY, FL 32401

Current Mailing Address:

904 FLOWER AVE.
PANAMA CITY, FL 32401 US

FEI Number: 83-1097509

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEATON, ANGELA
904 FLOWER AVE.
PANAMA CITY, FL 32401 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 SEATON, ANGELA
Address 904 FLOWER AVE.
City-State-Zip: PANAMA CITY FL 32401

Title VP
Name ANGIER, DAVID
Address 904 FLOWER AVE.
City-State-Zip: PANAMA CITY FL 32401

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: ANGELA SEATON

PRESIDENT

01/08/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date