## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000203899

Entity Name: NORELUS COUNSELING AND FAMILY CENTER LLC

FILED
Jan 07, 2020
Secretary of State
2048728166CC

## **Current Principal Place of Business:**

18441 NW 2ND AVE SUITE 216 MIAMI, FL 33169

## **Current Mailing Address:**

18441 NW 2ND AVE SUITE 216 MIAMI, FL 33169 US

FEI Number: 83-1794547 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

NORELUS, AROLD 18425 NW 2ND AVE SUITE 404G MIAMI, FL 33169 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: AROLD NORELUS 01/07/2020

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR Title MGR

Name NORELUS, EKIUWA T Name NORELUS, AROLD

Address 18441 NW 2ND AVE SUITE 216 Address 18441 NW 2ND AVE SUITE 216

City-State-Zip: MIAMI FL 33169 City-State-Zip: MIAMI FL 33169

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: AROLD NORELUS MANAGER 01/07/2020