

**2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L18000232970

**Entity Name:** ATILES PSYCHOLOGICAL NETWORK LLC

**Current Principal Place of Business:**

2159 FALLBROOKE CT.  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

2159 FALLBROOKE CT.  
TALLAHASSEE, FL 32308 US

**FEI Number: 83-2126701**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

ATILES TEJEDA, INGRID N  
5575 S. SEMORAN BLVD  
SUITE 36  
ORLANDO, FL 32822 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:** INGRID N ATILES TEJEDA

10/22/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name ATILES TEJEDA, INGRID N  
Address 2159 FALLBROOKE CT.  
City-State-Zip: TALLAHASSEE FL 32308

*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:** INGRID N ATILES TEJEDA

**REPRESENTATIVE**

10/22/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date