

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000047427

Entity Name: INDIVIDUAL SPEECH THERAPY SERVICES L.L.C

Current Principal Place of Business:

9930 SW 35TH TER
MIAMI, FL 33165

Current Mailing Address:

9930 SW 35TH TER
MIAMI, FL 33165 US

FEI Number: 83-4550758

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALVAREZ, ARIADNA
9930 SW 35TH TER
MIAMI, FL 33165 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	Title	MGR
Name	ALVAREZ, OTTO	Name	ALVAREZ, ARIADNA
Address	9930 SW 35TH TER	Address	9930 SW 35TH TER
City-State-Zip:	MIAMI FL 33165	City-State-Zip:	MIAMI FL 33165

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: ARIADNA ALVAREZ

MANAGER

06/29/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date