

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000088503

**Entity Name:** TANDEM BEHAVIORAL HEALTH & WELLNESS, LLC

**Current Principal Place of Business:**

802 WEST HENRY AVE  
TAMPA, FL 33604

**Current Mailing Address:**

802 WEST HENRY AVE  
TAMPA, FL 33604 US

**FEI Number:** 47-5056506

**Certificate of Status Desired:** No

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

WEIL, TIMOTHY DR.  
802 WEST HENRY AVE  
TAMPA, FL 33604 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:** DR. TIMOTHY WEIL

04/12/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name WEIL, TIMOTHY DR.  
Address 802 WEST HENRY AVE  
City-State-Zip: TAMPA FL 33604

*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:** TIMOTHY WEIL

OWNER/CLINICAL  
DIRECTOR

04/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date