

2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L19000101521

Entity Name: TRI-COUNTY SPEECH, PHYSICAL, AND OCCUPATIONAL THERAPIES LLC

Current Principal Place of Business:

1502 N DONNELLY ST STE 109
MOUNT DORA, FL 32757

Current Mailing Address:

1502 N DONNELLY ST STE 109
MOUNT DORA, FL 32757 US

FEI Number: 83-4492942

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JEAN PIERRE, MARLYNE
1502 N DONNELLY ST STE 109
MOUNT DORA, FL 32757 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: MARLYNE JEAN PIERRE

11/11/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name JEAN-PIERRE, MARLYNE
Address 1502 N DONNELLY ST STE 109
City-State-Zip: MOUNT DORA FL 32757

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: MARLYNE JEAN-PIERRE

DIRECTOR

11/11/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date