

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000256400

Entity Name: PALM BEACH HOLISTIC COUNSELING PLLC

Current Principal Place of Business:

1900 S. OLIVE AVE
WEST PALM BEACH, FL 33401

Current Mailing Address:

1900 S. OLIVE AVE
WEST PALM BEACH, FL 33401 US

FEI Number: 84-3541748

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DYKES, FORREST
1900 S. OLIVE AVE
WEST PALM BEACH, FL 33401 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
Name DYKES, FORREST
Address 1900 S. OLIVE AVE
City-State-Zip: WEST PALM BEACH FL 33401

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: FORREST DYKES

REGISTERED AGENT

04/01/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date