

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000274629

Entity Name: SERENE TRAILS THERAPY, LLC

Current Principal Place of Business:

8401 LAKE WORTH ROAD, SUITE 210
LAKE WORTH, FL 33467

Current Mailing Address:

8401 LAKE WORTH ROAD, SUITE 210
LAKE WORTH, FL 33467 US

FEI Number: 84-3720691

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMAS J. MACCARI P.A.
7700 CONGRESS AVE
STE 1134
BOCA RATON, FL 33487 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 MGR
Name RICE, BRITTANY
Address 8401 LAKE WORTH ROAD, SUITE 210
City-State-Zip: LAKE WORTH FL 33467

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: BRITTANY RICE

MGR

02/05/2025

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date