

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000067825

Entity Name: ISAAC'S FAMILY THERAPY, LLC

Current Principal Place of Business:

8261 NW 107TH CT UNIT 7
DORAL, FL 33178

Current Mailing Address:

8261 NW 107TH CT UNIT 7
DORAL, FL 33178 US

FEI Number: 85-0876942

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ESCALANTE, OLGA L
8261 NW 107TH CT UNIT 7
DORAL, FL 33178 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	Title	MGR
Name	ESCALANTE, OLGA L	Name	MENDOZA ESCALANTE, CLAUDIA
Address	8261 NW 107TH CT UNIT 7	Address	8261 NW 107TH CT UNIT 7
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

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: OLGA L ESCALANTE

MGR

02/16/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date