

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000303888

Entity Name: COUNSELING COLLECTIVE, LLC**Current Principal Place of Business:**101 PLAZA REAL S
228
BOCA RATON, FL 33432**Current Mailing Address:**101 PLAZA REAL S
228
BOCA RATON, FL 33432**FEI Number:** 85-3387353**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PENA, SARA S
101 PLAZA REAL S
228
BOCA RATON, FL 33432 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 AR
Name DR STEVIE, LLC
Address 101 PLAZA REAL S, 228
City-State-Zip: BOCA RATON FL 33432Title AR
Name AMY EFFMAN THERAPY SERVICES,
LLC
Address 101 PLAZA REAL S, 226
City-State-Zip: BOCA RATON FL 33432Title AR
Name CROSSWINDS COUNSELING &
PSYCHOTHERAPY, LLC
Address 101 PLAZA REAL S, 226
City-State-Zip: BOCA RATON FL 33432

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: SARA S PENA**OWNER****03/30/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date