

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000387732

**Entity Name:** INSIGHT HEALING COUNSELING LLC

**Current Principal Place of Business:**

2731 EXECUTIVE PARK DR.  
SUITE 9  
WESTON, FL 33331

**Current Mailing Address:**

2731 EXECUTIVE PARK DR.  
SUITE 9  
WESTON, FL 33331

**FEI Number:** 86-1815174

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

DE LUCIA DI VORA, DANTE  
3470 EAST COAST AVE.  
APT. H1502  
MIAMI, FL 33137 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            MGMR  
Name            DE LUCIA, TATIANA  
Address        3275 HUNGTINTON  
City-State-Zip: WESTON FL 33332

*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:** TATIANA DE LUCIA

MGMR

02/01/2021

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date