

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000096057

Entity Name: SILVER PALM THERAPY SOLUTIONS, LLC

Current Principal Place of Business:

12967 SW 219 TERR
MIAMI, FL 33170

Current Mailing Address:

PO BOX 972254
MIAMI, FL 33197 US

FEI Number: 87-4795009

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HALIM, ANJELICA J
12967 SW 219 TERR
MIAMI, FL 33170 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 P
Name HALIM, ANJELICA J
Address 12967 SW 219 TERR
City-State-Zip: MIAMI FL 33170

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: ANJELICA JANIS HALIM

PRESIDENT

02/03/2022

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date