

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000369195

Entity Name: PSYCH ASSESSMENT THERAPEUTIC SERVICES, LLC

Current Principal Place of Business:

11820 MIRAMAR PKWY
SUITE 301
MIRAMAR, FL 33025

Current Mailing Address:

1561 SW 190TH AVE.
PEMBROKE PINES, FL 33029 US

FEI Number: 87-2224766

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUCKNOR INGRAM, SHAKERA
11820 MIRAMAR PKWY
SUITE 223
MIRAMAR, FL 33025 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 AMBR
Name BUCKNOR INGRAM, SHAKERA
Address 1561 SW 190TH AVE.
City-State-Zip: PEMBROKE PINES FL 33029

Title OTHER
Name INGRAM, ARNOLD RENALDO
Address 1561 SW 190TH AVE.
City-State-Zip: PEMBROKE PINES FL 33029

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: SHAKERA BUCKNOR INGRAM

OWNER

03/15/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date