#### 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000027088

Entity Name: SMART CHOICE OCCUPATIONAL THERAPY LLC

**FILED** Apr 22, 2023 **Secretary of State** 2426603267CC

# **Current Principal Place of Business:**

7901 4TH STREET NORTH SUITE 300 ST. PETERSBURG, FL 33702

# **Current Mailing Address:**

7901 4TH STREET NORTH SUITE 300 ST. PETERSBURG, FL 33702 US

FEI Number: 87-4708443 Certificate of Status Desired: Yes

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

REGISTERED AGENTS INC 7901 4TH STREET NORTH SUITE 300 ST. PETERSBURG, FL 33702 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** 

SA ENTERPRISE HOLDINGS LLC Name Address 30 NORTH GOULD STREET SUITE R

City-State-Zip: SHERIDAN WY 82801

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.

**MEMBER** 

SIGNATURE: SUSAN ANDERSON

Electronic Signature of Signing Authorized Person(s) Detail

04/22/2023 Date