

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000182835

Entity Name: GATEWAY TO YOU MENTAL HEALTH COUNSELING CENTER
PLLC

Current Principal Place of Business:

1695 SW 116TH AVE
PEMBROKE PINES, FL 33025

Current Mailing Address:

1695 SW 116TH AVE
BLD 157
PEMBROKE,PINES, FL 33025 US

FEI Number: 92-3470817

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FELIX, VICTOR D
12026 WASHINGTON STREET
PEMBROKE PINES, 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 MGR
Name MALDONADO, SHAKIRA
Address 1695 SW 116TH AVE
City-State-Zip: PEMBROKE PINES FL 33025

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: SHAKIRA MALDONADO

FOUNDER

01/02/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date