

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000354588

Entity Name: PSIXI MENTAL HEALTH SOLUTIONS, LLC

Current Principal Place of Business:

14402 WATERLOO ROAD
ODESSA, FL 33556

Current Mailing Address:

14402 WATERLOO ROAD
ODESSA, FL 33556 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOULIANOS, NIKITAS
14402 WATERLOO ROAD
ODESSA, FL 33556 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 KOULIANOS, NIKITAS
Address 14402 WATERLOO ROAD
City-State-Zip: ODESSA FL 33556

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: NIKITAS KOULIANOS

MGR

05/01/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date