2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2025
Secretary of State
6630787806CC

DOCUMENT# L23000411900

Entity Name: MY THREE WITH ASD, LLC

Current Principal Place of Business:

3447 LOUNGING WREN LN
BARTOW, FL 33830

Current Mailing Address:

3447 LOUNGING WREN LN
BARTOW, FL 33830 US

FEI Number: 93-3214747

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OWENS, KRISTIE G
3447 LOUNGING WREN LANE
BARTOW, FL 33830 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, AUTHORIZED MEMBER
Name	OWENS, JONATHON T
Address	3447 LOUNGING WREN LANE
City-State-Zip:	BARTOW FL 33830

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: JONATHON T OWENS OWNER 03/03/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date