

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000540444

Entity Name: AMV SPEECH THERAPY, LLC

Current Principal Place of Business:

3308 W. WYOMING CIRCLE
TAMPA, FL 33611

Current Mailing Address:

3308 W. WYOMING CIRCLE
TAMPA, FL 33611

FEI Number: 93-4967937

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VIGLIA, ABIGAIL
3308 W. WYOMING CIRCLE
TAMPA, FL 33611 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 VIGLIA, ABIGAIL
Address 3308 W. WYOMING CIRCLE
City-State-Zip: TAMPA FL 33611

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: ABIGAIL VIGLIA

MANAGER

03/04/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date