2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2025
Secretary of State
1345804831CC

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Entity Name: A&C PSYCHOLOGICAL SERVICES, LLC

Current Principal Place of Business:

450 STATE ROAD 13 NORTH
SUITE 106 #441
ST JOHNS, FL 32259

Current Mailing Address:

450 STATE ROAD 13 NORTH
SUITE 106 #441
ST JOHNS, FL 32259 US

FEI Number: 33-1517775

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PETE ORLANDO CPA PA
4745 SUTTON PARK CT
SUITE 101
JACKSONVILLE, FL 32224 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
Name	LEARY, KIMBERLY
Address	450 STATE ROAD 13 NORTH STE 106 #441
City-State-Zip:	ST JOHNS FL 32259

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: KIMBERLY LEARY AUTHORIZED MEMBER 04/24/2025

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