

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000472258

**Entity Name:** L'RESSNER CENTER OF HEALING LLC

**Current Principal Place of Business:**

1074 KANE CONCOURSE  
BAY HARBOR ISLANDS, FL 33154

**Current Mailing Address:**

1074 KANE CONCOURSE  
MIAMI BEACH, FL 33154 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LETICIA, BORJA GALLEGOS  
9501 E BAY HARBOR DR APT 5A  
BAY HARBOR ISLANDS, FL 33154 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:** LETICIA BORJA GALLEGOS

02/04/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            BORJA, GALLEGOS LETICIA  
Address        9501 E BAY HARBOR DR APT 5A  
City-State-Zip: BAY HARBOR ISLANDS FL 33154

*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:** LETICIA BORJA GALLEGOS

MANAGING MEMBER

02/04/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date