

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000006654

Entity Name: CENTER FOR AUTISM AND RELATED DISORDERS, LLC

Current Principal Place of Business:

21600 OXNARD STREET SUITE 1800
WOODLAND HILLS, CA 91367

Current Mailing Address:

21600 OXNARD STREET SUITE 1800
WOODLAND HILLS, CA 91367 US

FEI Number: 95-4641453

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: KAREN FUGELSANG

03/19/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PROJECT MANAGER
Name BRILMAN, MEGAN
Address 21600 OXNARD STREET SUITE 1800
City-State-Zip: WOODLAND HILLS CA 91367

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: MEGAN BRILMAN

MANAGER

03/19/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date