

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M17000006698

Entity Name: STRETCH PERFORMANCE PSYCHOLOGY, PLLC

Current Principal Place of Business:

115 NE 7TH AVE
GAINESVILLE, FL 32601

Current Mailing Address:

2112 SW 34TH ST
#140
GAINESVILLE, FL 32608 US

FEI Number: 47-5589716

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALEXANDER, AMANDA
2112 SW 34TH ST
#140
GAINESVILLE, FL 32608 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	MGMR	Title	AUTHORIZED REPRESENTATIVE
Name	ALEXANDER, AMANDA	Name	ELROD, JARRED LEE MR.
Address	2112 SW 34TH ST #140	Address	2112 SW 34TH ST #140
City-State-Zip:	GAINESVILLE FL 32608	City-State-Zip:	GAINESVILLE FL 32608

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: AMANDA C. ALEXANDER

MANAGING MEMBER

02/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date