# 2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# M17000009532

Entity Name: IMPACT BEHAVIORAL COUNSELING, LLC

# Current Principal Place of Business:

3838 OAK LAWN AVE STE 1450 DALLAS, TX 75219

# **Current Mailing Address:**

1000 URBAN CENTER DR STE 600 BIRMINGHAM, AL 35242 US

# FEI Number: 38-4013585

### Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC. 515 EAST PARK AVENUE, 2ND FLOOR TALLAHASSEE, FL 32301 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	: KRISTA ABAIR, ASSISTANT SECRETARY			01/20/2023
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	OLSON, BRYAN	Name	PRIOR, JADE	
Address	3838 OAK LAWN AVE STE 1450	Address	3838 OAK LAWN AVE STE 1450	
City-State-Zip:	DALLAS TX 75219	City-State-Zip:	DALLAS TX 75219	
Title	MGR	Title	AUTHORIZED REPRESENTATI	/E
Name	OLSON, BRYAN	Name	MORGAN , MARIE	
Address	3838 OAK LAWN AVE STE 1450	Address	1000 URBAN CENTER DR STE 600	
City-State-Zip:	DALLAS TX 75219	City-State-Zip:	BIRMINGHAM AL 35242	

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: MARIE MORGAN

### AUTHORIZED REPRESENTATIVE

01/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Jan 20, 2023 Secretary of State 3522783609CC

# Certificate of Status Desired: No