

CAROL LIPSCOMB MIRONES

License Number: MT4869

Data As Of 9/18/2026

Profession	Licensed Marriage & Family Therapist
License	MT4869
License Status	Clear/Active
Qualifications	Qualified Supervisor MFT
License Expiration Date	3/31/2027
License Original Issue Date	03/06/2024
Address of Record	2601 E. OAKLAND PARK BLVD STE 205 FORT LAUDERDALE, FL 33306
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

12505 Orange Drive Suite 901
DAVIE, FL 33330

Address

10139 NW 31st Street Suite 102
CORAL SPRINGS, FL 33065

Address

3750 Gunn Hwy Suite 101
TAMPA, FL 33618

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

Public Complaints

No Public Complaint Found

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

[Discipline Public Records Request](#)

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at:

Division of Medical Quality Assurance
Public Records
4052 Bald Cypress Way, Bin C01
Tallahassee, FL 32399-3251

Please include the following:

1. Full name and license number of the practitioner;
2. Name and address where documents are to be sent; and
3. If you require certification of the documents, a \$25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
MARSHALL-YOQUOI, HENRIKA M	SUBORDINATE	MARRIAGE & FAMILY THERAPIST INTERN	3946	9/24/2024
MORIN, MIA	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	23422	6/24/2026
PANDEY, SOPHIA	SUBORDINATE	MARRIAGE & FAMILY THERAPIST INTERN	4106	9/24/2024

Click on the License Number to view License Details for that Practitioner

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