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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

SIGNATURE: ANNA ELLIOTT

Electronic Signature of Signing Officer/Director Detail

OWNER

2020 FLORIDA PROFIT CORPORATION REINSTATEMENT

Entity Name: ALL ABOARD THERAPY OF THE TREASURE COAST, INC.

Current Principal Place of Business:

1255 37TH STREET SUITE C VERO BEACH, FL 32960

Current Mailing Address:

DOCUMENT# P17000100218

1255 37TH STREET SUITE C VERO BEACH, FL 32960 US

FEI Number: 38-3772129

Name and Address of Current Registered Agent:

ELLIOTT, ANNA 1255 37TH STREET SUITE C VERO BEACH, FL 32960 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	ANNA ELLIOTT			10/12/2020	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	D	Title	D		
Name	ELLIOTT, ANNA	Name	LUSK, HOPE		
Address	1255 37TH STREET SUITE C	Address	1255 37TH STREET SUITE C		
City-State-Zip:	VERO BEACH FL 32960	City-State-Zip:	VERO BEACH FL 32960		

Certificate of Status Desired: No

10/12/2020

Date

FILED Oct 12, 2020 Secretary of State 6608916006CR