2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030402

Entity Name: PAIN INSTITUTE OF TAMPA BAY, P.L.

FILED Feb 19, 2024 Secretary of State 4790273563CC

Current Principal Place of Business:

2818 CYPRESS RIDGE BLVD SUITE 100 WESLEY CHAPEL. FL 33544

Current Mailing Address:

501 N REO STREET STE. #1 TAMPA. FL 33609 US

FEI Number: 20-0190557 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOOD, DAVID A MANAGER 501 N REO STREET STE. #1 TAMPA, FL 33609 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: DAVID A. WOOD 02/19/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title MANAGER

Name WOOD, DAVID A MANAGER

Address 501 N REO STREET

STE. #1

City-State-Zip: TAMPA FL 33609

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: DAVID A. WOOD MANAGER 02/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date