## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000056971

Entity Name: THERALINKS RELATED SERVICES, LLC

**Current Principal Place of Business:** 

11 HICKORY WAY

WINTER HAVEN, FL 33881-9204

**Current Mailing Address:** 

11 HICKORY WAY

WINTER HAVEN. FL 33881-9204 US

FEI Number: 45-2496000 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANDERS, JASON 11 HICKORY WAY WINTER HAVEN, FL 33881 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

FILED May 01, 2023

**Secretary of State** 

2145594820CC

Authorized Person(s) Detail:

Title MGRM

IGRM Title MGRM

Name SANDERS, JASON Name SANDERS, SAMUEL G

Address 11 HICKORY WAY Address 6780 WINTERSET GARDENS RD.

City-State-Zip: WINTER HAVEN FL 33881 City-State-Zip: WINTER HAVEN FL 33884

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: JASON SANDERS

**MANAGER** 

05/01/2023