

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000154414

Entity Name: MUSCLE SPECIFIC PAINCARE CENTER LLC

Current Principal Place of Business:

1011 W HALLANDALE BCH BLVD
HALLANDALE, FL 33009

Current Mailing Address:

3479 NE 163RD STREET
2078
MIAMI, FL 33160 US

FEI Number: 47-2033385

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAYLOR, KAYWANA
3479 NE 163RD STREET
2078
MIAMI, FL 33160 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: KAYWANA TAYLOR

04/21/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name TAYLOR, KAYWANA
Address 3479 NE 163RD STREET
2078
City-State-Zip: MIAMI FL 33160

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: KAYWANA TAYLOR

MANAGER

04/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date