

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000073242

Entity Name: RITECARE PHYSICAL THERAPY, LLC

Current Principal Place of Business:

2100 FRANKLIN STREET, SUITE 355
OAKLAND, CA 94612

Current Mailing Address:

2100 FRANKLIN STREET, SUITE 355
OAKLAND, CA 94612 US

FEI Number: 82-4006320

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Authorized Person(s) Detail :

Title MANAGER
Name JOUKAR, HOSSEIN
Address 2100 FRANKLIN STREET, SUITE 355
City-State-Zip: OAKLAND CA 94612

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: HOSSEIN JOUKAR

MANAGER

07/14/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date