

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000199264

Entity Name: RESTORATIVE NONSURGICAL ORTHOPEDICS AND SPINE, LLC

Current Principal Place of Business:

668 N ORLANDO AVE
STE 1020
MAITLAND, FL 32751

Current Mailing Address:

668 N ORLANDO AVE
STE 1020
MAITLAND, FL 32751 US

FEI Number: 85-2994875

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOLDSTEIN, BRADLEY
668 N ORLANDO AVE
STE 1020
MAITLAND, FL 32751 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 MGR
Name GOLDSTEIN, BRADLEY
Address 668 N ORLANDO AVE
STE 1020
City-State-Zip: MAITLAND FL 32751

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: BRADLEY GOLDSTEIN

MGR

01/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date