

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000078464

Entity Name: PAIN TREATMENT SPECIALISTS, LLC

Current Principal Place of Business:

2601 E OAKLAND PARK BLVD STE 200
FORT LAUDERDALE, FL 33306

Current Mailing Address:

2601 E OAKLAND PARK BLVD
SUITE 200
FORT LAUDERDALE, FL 33306 US

FEI Number: 82-5013478

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DISTEFANO, ROBERT P
2601 E OAKLAND PARK BLVD STE 200
FORT LAUDERDALE, FL 33306 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 DISTEFANO, YOUMNA E
Address 2601 E OAKLAND PARK BLVD STE 200

City-State-Zip: FORT LAUDERDALE FL 33306

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: YOUMNA E. DISTEFANO

MANAGER

03/10/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date