

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000276098

**Entity Name:** WG REHAB HOLDINGS, LLC

**Current Principal Place of Business:**

1000 GATES AVE  
BROOKLYN, NY 11221

**Current Mailing Address:**

1000 GATES AVE  
BROOKLYN, NY 11221 US

**FEI Number:** 83-2796756

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VCORP SERVICES, LLC  
1200 S 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 AMBR  
Name QUALITY REHAB PARTNERS LLC  
Address 1000 GATES AVE  
City-State-Zip: BROOKLYN NY 11221

*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:** QUALITY REHAB PARTNERS LLC

**MANAGER**

**04/28/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date