## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L20000018267

Entity Name: GENTLE HANDS THERAPY, LLC

## **Current Principal Place of Business:**

11025 NW 39TH STREET APT 101 SUNRISE, FL 33351

# **Current Mailing Address:**

11025 NW 39TH STREET APT 101 SUNRISE, FL 33351 US

### FEI Number: 84-4437178

### Name and Address of Current Registered Agent:

GILLILAND, IRENE S 11025 NW 39TH STREET APT 101 SUNRISE, FL 33351 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

### Authorized Person(s) Detail :

Title	CEO
Name	GILLILAND, IRENE S
Address	11025 NW 39TH STREET APT 101
City-State-Zip:	SUNRISE FL 33351

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.

CEO

SIGNATURE: IRENE GILLILAND

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 30, 2023 Secretary of State 6386371180CC

Certificate of Status Desired: Yes

Date

03/30/2023 Date