

2022 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

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GILLILAND, IRENE S
10651 NW 28TH STREET
SUNRISE, FL 33322 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 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.

SIGNATURE: IRENE GILLILAND

04/09/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date