

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000086774

Entity Name: GORILLA GRIP THERAPIES LLC

Current Principal Place of Business:

988 WESTWOOD SQUARE SUITE 1000
1000
OVIEDO , FL 32765

Current Mailing Address:

17706 LILY BLOSSOM LN
ORLANDO, FL 32820 UN

FEI Number: 86-2338724

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GAUTIER, FREDDIE DR.
17706 LILY BLOSSOM LN
ORLANDO, FL 32820 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: FREDDIE GAUTIER

05/08/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name GAUTIER, FREDDIE DR.
Address 17706 LILY BLOSSOM LN
City-State-Zip: ORLANDO 32820

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: FREDDIE GAUTIER

05/08/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date