

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000159694

Entity Name: UPPER HAND PHYSIOTHERAPY LLC

Current Principal Place of Business:

18636 LAKE BEND DRIVE
JUPITER, FL 33458

Current Mailing Address:

18636 LAKE BEND DRIVE
JUPITER, FL 33458 US

FEI Number: 87-3472541

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUY, TRACY
18636 LAKE BEND DRIVE
JUPITER, FL 33458 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 GUY, TRACY
Address 18636 LAKE BEND DRIVE
City-State-Zip: JUPITER FL 33458

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: TRACY GUY

MANAGER

01/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date