2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 14, 2025
Secretary of State
0229715634CC

DOCUMENT# L21000291916

Entity Name: RESTORATION THERAPEUTIC MASSAGE LLC

Current Principal Place of Business:

1302 SE 25TH LOOP
STE 104
OCALA, FL 34471

Current Mailing Address:

4446 SW 49TH AVE
OCALA, FL 34474 US

FEI Number: 87-3475370

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLS, BRITTNEY M
4446 SW 49TH AVE
OCALA, FL 34474 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	MILLS, BRITTNEY M
Address	4446 SW 49TH AVE
City-State-Zip:	OCALA FL 34474

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: BRITTNEY MILLS OWNER 02/14/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date