

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000040520

Entity Name: THERATRIN PLLC

Current Principal Place of Business:

760 8TH COURT
VERO BEACH, FL 32962

Current Mailing Address:

5226 NORTHWEST NORTH LOVOY CIRCLE
PORT ST. LUCIE, FL 34986 US

FEI Number: 88-1206191

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOOMIS, JAIME M
5226 NORTHWEST NORTH LOVOY CIRCLE
PORT ST. LUCIE, FL 34986 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 LOOMIS, JAIME M
Address 2625 TROPICAL AVE
City-State-Zip: VERO BEACH FL 32960

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: LOOMIS, JAIME M

MANAGER, OWNER

01/11/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date