

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000252621

Entity Name: DR T SPINAL CARE, LLC

Current Principal Place of Business:

3722 CENTRAL AVE
FORT MYERS, FL 33901

Current Mailing Address:

3722 CENTRAL AVE
STE 2
FORT MYERS, FL 33901 US

FEI Number: 93-1525847

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TINNAKON, XAIYARATT
1565 IVY WAY
NAPLES, FL 34117 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 PRESIDENT
Name XAIYARATT, TINNAKON
Address 1565 IVY WAY
City-State-Zip: NAPLES FL 34117

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: TINNAKON XAIYARATT

PRESIDENT

02/18/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date