

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000237892

Entity Name: ANDRIA THERAPY SERVICES LLC

Current Principal Place of Business:

1707 WEST 68TH STREET
HIALEAH, FL 33014

Current Mailing Address:

1707 WEST 68TH STREET
HIALEAH, FL 33014 US

FEI Number: 99-4511462

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALONSO, ANDRIA
1707 WEST 68TH STREET
HIALEAH, FL 33014 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 AMBR
Name ALONSO, ANDRIA
Address 1707 WEST 68TH STREET
City-State-Zip: HIALEAH FL 33014

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: ANDRIA ALONSO

AMBR

04/18/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date