2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2017
Secretary of State
CC1795377353

DOCUMENT# L06000062740

Entity Name: JAD THERAPY LLC

Current Principal Place of Business:

1669 SE HIGHWAY 19
CRYSTAL RIVER, FL 34429

Current Mailing Address:

1669 SE HIGHWAY 19
CRYSTAL RIVER, FL 34429

FEI Number: 20-5048038

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DERRENBACKER, JAMES AJR.
1669 SE HIGHWAY 19
CRYSTAL RIVER, FL 34429 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	MGRM
Name	DERRENBACKER, JAMES AJR.
Address	1669 SE HIGHWAY 19
City-State-Zip:	CRYSTAL RIVER FL 34429

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: JAMES A. DERRENBACKER JR PHYSICIAN 04/21/2017

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