

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000099188

Entity Name: DEVSOF REHAB LLC

Current Principal Place of Business:

419 THUNDER GULCH CT
ORLANDO, FL 32824

Current Mailing Address:

419 THUNDER GULCH CT
ORLANDO, FL 32824

FEI Number: 27-3540968

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATEL, PAYAL J
419 THUNDER GULCH CT
ORLANDO, FL 32824 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 PATEL, PAYAL J
Address 419 THUNDER GULCH CT
City-State-Zip: ORLANDO FL 32824

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAYAL PATEL

MGR

02/10/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date