

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000005733

**FILED
Apr 29, 2013
Secretary of State
CC8727203883**

Entity Name: LAURENTINE'S PHYSICAL THERAPY LLC

Current Principal Place of Business:

11635 ROBINSON STREET
UNIT B
MIAMI, FL 33176

Current Mailing Address:

11635 ROBINSON STREET
UNIT B
MIAMI, FL 33176 US

FEI Number: 45-4248042

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAMUELS, RICHARD
11635 ROBINSON STREET
UNIT B
MIAMI, FL 33176 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	Title	MGR
Name	SAMUELS, RICHARD	Name	OTTEY-SAMUELS, KAREN
Address	11635 ROBINSON STREET	Address	11635 ROBINSON STREET
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33176

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: RICHARD SAMUELS

MGR

04/29/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date