## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000101972

Entity Name: SYMMETRY PHYSICAL THERAPY LLC

**Current Principal Place of Business:** 

28 W. FLAGLER SUITE 550 MIAMI, FL 33130

**Current Mailing Address:** 

1155 BRICKELL BAY DR

509

MIAMI, FL 33131 US

FEI Number: 46-3211580 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAK COURT

TAMPA, FL 33612 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

**FILED** Apr 25, 2015

**Secretary of State** 

CC9540403912

## Authorized Person(s) Detail:

Title MGRM

SIKACZOWSKI, NATALIA Name 1155 BRICKELL BAY DR Address

City-State-Zip: MIAMI FL 33131

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: NATALIA SIKACZOWSKI

DOCTOR OF PHYSICAL THERAPY, OWNER

04/25/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date