

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000053712

Entity Name: A THERAPY TOUCH LLC

Current Principal Place of Business:

3467 PINE RIDGE RD
#102
NAPLES, FL 34109

Current Mailing Address:

5934 PREMIER WAY
APT 2417
NAPLES, FL 34109 US

FEI Number: 46-5376059

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEGALZOOM UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS COURT
SUITE A
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: LEGALZOOM

01/10/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name DACUNHA, JANE
Address 3467 PINE RIDGE RD
 SUITE 102
City-State-Zip: NAPLES FL 34109

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: JANE DACUNHA

MANAGER

01/10/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date