

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000016101

Entity Name: H & A PHYSICAL THERAPY LLC

Current Principal Place of Business:

5445 SW 115 AVE
MIAMI, FL 33165

Current Mailing Address:

5445 SW 115 AVE
MIAMI, FL 33165 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FILE FLORIDA CO.
5445 SW 115 AVE
MIAMI, FL 33165 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: DAVID FELD

02/07/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name VALDES, HAYMED
Address 5445 SW 115 AVE
City-State-Zip: MIAMI FL 33165

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: HAYMED VALDES

02/07/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date