

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000096979

**Entity Name:** VDL THERAPY SERVICES LLC

**Current Principal Place of Business:**

7761 SW 103RD PLACE  
MIAMI, FL 33173

**Current Mailing Address:**

7700 N KENDALL DRIVE, SUITE #300-N  
MIAMI, FL 33156 US

**FEI Number:** 82-1411101

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DE LA LLAMA, VANESSA A  
7761 SW 103RD PLACE  
MIAMI, FL 33173 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	AP	Title	P
Name	DE LA LLAMA, VIVIAN F	Name	DE LA LLAMA, VANESSA A
Address	5016 SW 72ND AVENUE	Address	7761 SW 103RD PLACE
City-State-Zip:	SOUTH MIAMI FL 33155	City-State-Zip:	MIAMI FL 33173

*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:** VANESSA DE LA LLAMA

**PRESIDENT**

**01/18/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date