

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000067263

Entity Name: PHYSIOLOGIX SPORTS PHYSICAL THERAPY PLLC

Current Principal Place of Business:

185 SE 14TH TERRACE,
APT. 906
MIAMI, FL 33131

Current Mailing Address:

185 SE 14TH TERRACE,
APT. 906
MIAMI, FL 33131 US

FEI Number: 82-4848713

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

POLISZUK, ROBERT
185 SE 14TH TERRACE
APT. 906
MIAMI, FL 33131 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 AMBR
Name POLISZUK, ROBERT
Address 185 SE TERRACE, APT. 906
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: ROBERT POLISZUK

01/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date