2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2025
Secretary of State
1316491125CC

DOCUMENT# L18000173672

Entity Name: OPTIMIZED PHYSICAL THERAPY, LLC

Current Principal Place of Business:

1211 SAWDUST CT.
VALRICO, FL 33596

Current Mailing Address:

1211 SAWDUST CT.
VALRICO, FL 33596

FEI Number: 83-2737454

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VERZOSA, JOEL
1211 SAWDUST CT.
VALRICO, FL 33596 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	OWNER
Name	VERZOSA, JOEL DR.
Address	1211 SAWDUST CT.
City-State-Zip:	VALRICO FL 33596

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: JOEL VERZOSA OWNER 04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date