

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000277180

Entity Name: INTEGRATED REHAB CONSULTANTS FLORIDA, PLLC

Current Principal Place of Business:

401 N MICHIGAN AVE, STE 1200
CHICAGO, IL 60611

Current Mailing Address:

401 N MICHIGAN AVE, STE 1200
CHICAGO, IL 60611 US

FEI Number: 83-2699887

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 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 MANAGER
Name PATEL, AMISH
Address 401 N MICHIGAN AVE, STE 1200
City-State-Zip: CHICAGO IL 60611

Title OFFICER
Name RAY, MATT
Address 401 N MICHIGAN AVE, STE 1200
City-State-Zip: CHICAGO IL 60611

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: AMISH PATEL

MANAGER

04/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date