2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2024
Secretary of State
0828652364CC

DOCUMENT# L19000062096

Entity Name: TAMPA INJURY & WELLNESS CENTER LLC

Current Principal Place of Business:

4150 N. ARMENIA AVE
SUITE 102
TAMPA, FL 33607

Current Mailing Address:

3727 TUCKERTON DR
LAND O LAKES, FL 34638 US

FEI Number: 83-3938495

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATEL, DIPTI R
3727 TUCKERTON DR
LAND O LAKES, FL 34638 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: DIPTI PATEL 04/24/2024

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	PATEL, DIPTI	Name	LEWIS, MATTHEW
Address	3727 TUCKERTON DR	Address	3727 TUCKERTON DR
City-State-Zip:	LAND O LAKES FL 34638	City-State-Zip:	LAND O LAKES FL 34638

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: DIPTI PATEL OWNER 04/24/2024

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