

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000119016

Entity Name: LINKE THERAPY LLC

Current Principal Place of Business:

4602 SANDY COVE TER
LAKE WORTH, FL 33467

Current Mailing Address:

4602 SANDY COVE TER
LAKE WORTH, FL 33467 US

FEI Number: 84-1909228

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LINKE, COURTNEY
4602 SANDY COVE TER
LAKE WORTH, FL 33467 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 LINKE, COURTNEY
Address 4602 SANDY COVE TER
City-State-Zip: LAKE WORTH FL 33467

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: COURTNEY LINKE

OWNER

04/07/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date