

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000209463

Entity Name: MYO-THERAPY HEALTHCARE LLC

Current Principal Place of Business:

1000 WINDERLEY PLACE
#226
MAITLAND, FL 32751

Current Mailing Address:

1000 WINDERLEY PLACE
#226
MAITLAND, FL 32751 US

FEI Number: 84-2745953

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EMPIRE ACCOUNTING, INC
878 W TIMBERLAND TRL
ALTAMONTE SPRINGS, FL 32714 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: CHRISTIAN MALLARDI

03/09/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name FEKANY, JOANN
Address 1000 WINDERLEY PLACE
#226
City-State-Zip: MAITLAND FL 32751

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: JOANN M FEKANY

MANAGER

03/09/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date