

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000151968

Entity Name: S & S THERAPY SERVICES LLC

Current Principal Place of Business:

9142 NW 114TH ST
HIALEAH GARDENS, FL 33018

Current Mailing Address:

9142 NW 114TH ST
HIALEAH GARDENS, FL 33018 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COBIELLA, YOANET
9142 NW 114TH ST
HIALEAH GARDENS, FL 33018 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 MGR
Name COBIELLA, YOANET
Address 9142 NW 114TH ST
City-State-Zip: HIALEAH GARDENS FL 33018

Title MGR
Name PATO, LUIS M
Address 9142 NW 114TH ST
City-State-Zip: HIALEAH GARDENS FL 33018

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: COBIELLA , YOANET

MGR

05/01/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date