## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000177089

Entity Name: D & K THERAPY LLC

130 TUPELO DRIVE

**Current Principal Place of Business:** 

SAN MATEO. FL 32187

**Current Mailing Address:** 

130 TUPELO DRIVE SAN MATEO. FL 32187 US

FEI Number: 85-1901036 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCLAIN, KAYLA 130 TUPELO DRIVE SAN MATEO, FL 32187 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: KAYLA MCCLAIN 04/30/2025

Electronic Signature of Registered Agent

Date

**FILED** Apr 30, 2025

**Secretary of State** 

9467376264CC

## Authorized Person(s) Detail:

Title MGR

Name MCCLAIN, KAYLA 130 TUPELO DRIVE Address City-State-Zip: SAN MATEO FL 32187

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.

**MGR** 

SIGNATURE: MCCLAIN, KAYLA