

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000323229

Entity Name: JONES PHYSICAL THERAPY, LLC

Current Principal Place of Business:

220 SW AUBUDON AVE
PORT ST LUCIE, FL 34984

Current Mailing Address:

220 SW AUBUDON AVE
PORT ST LUCIE, FL 34984 US

FEI Number: 85-3560263

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, JENNIFER M
220 SW AUBUDON AVE
PORT ST LUCIE, FL 34984 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 JONES, JENNIFER M
Address 220 SW AUBUDON AVE
City-State-Zip: PORT ST LUCIE FL 34984

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: JENNIFER M JONES

MGR

03/07/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date