

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000078300

Entity Name: 17-92 THERAPY LLC

Current Principal Place of Business:

1885 S US HWY 17 92
LONGWOOD, FL 32750

Current Mailing Address:

1885 S US HWY 17 92
LONGWOOD, FL 32750

FEI Number: 86-2275597

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIM, YUN H
1885 S US HWY 17 92
LONGWOOD, FL 32750 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 KIM, YUN H
Address 1885 S US HWY 17 92
City-State-Zip: LONGWOOD FL 32750

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: YUN H KIM

MGR

05/01/2022

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date