

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000175779

Entity Name: URBAY THERAPY CARE LLC

Current Principal Place of Business:

12231 SW 191ST ST
MIAMI, FL 33177

Current Mailing Address:

12231 SW 191ST ST
MIAMI, FL 33177 US

FEI Number: 86-3468407

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

URBAY GARCIGA, ALNERYS
12231 SW 191ST ST
MIAMI, FL 33177 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: ALNERYS URBAY GARCIGA

04/04/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name URBAY GARCIGA, ALNERYS
Address 12231 SW 191ST ST
City-State-Zip: MIAMI FL 33177

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: ALNERYS URBAY GARCIGA

MGR

04/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date