

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000339893

Entity Name: FLYPHYSIO EB LLC

Current Principal Place of Business:

8279 WEST HOMOSASSA TRAIL
HOMOSASSA, FL 34448

Current Mailing Address:

8279 WEST HOMOSASSA TRAIL
HOMOSASSA, FL 34448 US

FEI Number: 87-2029918

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ AND PARTNERS CPAS LLC
3211 PONCE DE LEON BLVD
STE 200
CORAL GABLES, FL 33134 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 AMBR
Name BEHRMANN, ERIC
Address 8279 WEST HOMOSASSA TRAIL
City-State-Zip: HOMOSASSA FL 34448

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: BEHRMANN, ERIC

MANAGER

01/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date