

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000358564

Entity Name: IC THERAPY, LLC

Current Principal Place of Business:

37 NORTH ORANGE AVENUE SUITE 500
ORLANDO, FL 32801

Current Mailing Address:

37 NORTH ORANGE AVENUE SUITE 500
ORLANDO, FL 32801 US

FEI Number: 87-2116119

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUERRELUS, ELANGE
16470 CEDAR RUN DRIVE 16470 CEDAR RUN DR
ORLANDO, FL 32828 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 MANAGER
Name GUERRELUS, ELANGE
Address 16470 CEDAR RUN DRIVE
City-State-Zip: ORLANDO FL 32828

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: ELANGE GUERRELUS

MANAGER

03/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date