2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 03, 2022
Secretary of State
7560359992CC

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Entity Name: AUTHENTIC REHAB LLC

Current Principal Place of Business:

2844 SHAUGHNESSY DRIVE
WELLINGTON, FL 33414

Current Mailing Address:

2844, SHAUGHNESSY DRIVE
WELLINGTON, FL 33414 US

FEI Number: 87-3983032

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KORIPALLI CHIRANJEEV, SANDHYA
2844 SHAUGHNESSY DRIVE
WELLINGTON, FL 33414 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	AR
Name	KORIPALLI CHIRANJEEV, SANDHYA
Address	2844 SHAUGHNESSY DRIVE
City-State-Zip:	WELLINGTON FL 33414

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: SANDHYA KORIPALLI CHIRANJEEVI MANAGING MEMBER 09/03/2022

Electronic Signature of Signing Authorized Person(s) Detail — Date