2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 13, 2023
Secretary of State
2779494697CC

DOCUMENT# L22000250679

Entity Name: TRANSITIONAL PAIN & SPECIALTY GROUP, LLC

Current Principal Place of Business:

4437 TOUR TRACE
LANDOLAKES, FL 34638

Current Mailing Address:

4437 TOUR TRACE
LANDOLAKES, FL 34638 US

FEI Number: 88-2783330

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUDE, JONATHAN
4437 TOUR TRACE
LANDOLAKES, FL 34638 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	Title	MANAGER
Name	GUDE, JONATHAN	Name	HASHMI, HASEEB
Address	4437 TOUR TRACE	Address	10103 GARDEN RETREAT COURT
City-State-Zip:	LANDOLAKES FL 34638	City-State-Zip:	TAMPA FL 33647
Title	MANAGER	Title	MANAGER
Name	BHALANI, MAULIK	Name	DEUTSCHER, RUSSELL
Address	1911 HAVEN BEND	Address	12406 BERKELEY SQUARE DRIVE
City-State-Zip:	TAMPA FL 33613	City-State-Zip:	TAMPA FL 33626

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: JONATHAN GUDE CEO, MANAGER 02/13/2023

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