2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2024
Secretary of State
3914420362CC

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Entity Name: JLN OCCUPATIONAL THERAPY LLC

Current Principal Place of Business:

8775 CORVUS DR
LAKE WORTH, FL 33467

Current Mailing Address:

8775 CORVUS DR
LAKE WORTH, FL 33467 US

FEI Number: 88-4175999

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NAPOLI, JESSICA
8775 CORVUS DR
LAKE WORTH, FL 33467 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	JESSICA NAPOLI
Address	8775 CORVUS DR
City-State-Zip:	LAKE WORTH FL 33467

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: JESSICA L NAPOLI OWNER 04/30/2024

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