2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2025
Secretary of State
4700689422CC

DOCUMENT# L24000479306

Entity Name: INTEGRATED PAIN SOLUTIONS OF FLORIDA, PLLC

Current Principal Place of Business:

27300 RIVERVIEW CENTER BLVD.
STE. 101
BONITA SPRINGS, FL 34134

Current Mailing Address:

27300 RIVERVIEW CENTER BLVD.
STE. 101
BONITA SPRINGS, FL 34134

FEI Number: 33-1996302

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DRAEGER, CURT
27300 RIVERVIEW CENTER BLVD.
STE. 101
BONITA SPRINGS, FL 34134 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
Name	DRAEGER, CURT
Address	840 VAN GOGH RD.
City-State-Zip:	ENGLEWOOD FL 34223

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: CURT DRAEGER MGR 04/07/2025

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