

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000009012

Entity Name: INHOME THERAPY, LLC

Current Principal Place of Business:

234 MALL BLVD, SUITE G-50
KING OF PRUSSIA, PA 19406

Current Mailing Address:

234 MALL BLVD, SUITE G-50
KING OF PRUSSIA, PA 19406 US

FEI Number: 27-0151755

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CHRISTINE KELM, ASSISTANT SECRETARY

04/25/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CFO
Name CONNOR, DAVID
Address 234 MALL BLVD, SUITE G-50
City-State-Zip: KING OF PRUSSIA PA 19406

Title CEO
Name MURPHY, MATTHEW
Address 234 MALL BLVD, SUITE G-50
City-State-Zip: KING OF PRUSSIA PA 19406

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: DAVID CONNOR

CFO

04/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date