

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000102657

Entity Name: THERAPY ENTERPRISE HOLDINGS, LLC

Current Principal Place of Business:

180 CENTER PLACE WAY
ST. AUGUSTINE, FL 32095

Current Mailing Address:

352 VALE DRIVE
ST. AUGUSTINE, FL 32095 US

FEI Number: 86-2784958

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VAVILALA, STEPHANIE JEAN
352 VALE DRIVE
ST. AUGUSTINE, FL 32095 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 VAVILALA, STEPHANIE JEAN
Address 352 VALE DRIVE
City-State-Zip: ST. AUGUSTINE FL 32095

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: STEPHANIE JEAN VAVILALA

MGR

04/15/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date