

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M20000010886

**Entity Name:** ALLAPATTAH REHAB OPERATIONS LLC

**Current Principal Place of Business:**

1000 GATES AVE., 5TH FL  
BROOKLYN, NY 11221

**Current Mailing Address:**

1000 GATES AVE., 5TH FL  
BROOKLYN, NY 11221

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VCORP SERVICES, LLC  
1200 S 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MBR  
Name GUTMAN, SAMUEL  
Address 1000 GATES AVE., 5TH FL  
City-State-Zip: BROOKLYN NY 11221

Title MBR  
Name GUTMAN, MALKA  
Address 1000 GATES AVE., 5TH FL  
City-State-Zip: BROOKLYN NY 11221

*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:** SAMUEL GUTMAN

**MEMBER**

**04/30/2022**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date