

**STATE OF CALIFORNIA** 

CORPORATION

Office of the Secretary of State

STATEMENT OF INFORMATION

## 

BA20250054684

For Office Use Only



File No.: BA20250054684 2025

| CALIFORNIA  | 1500<br>Sacra  | 11th Stre    | alifornia 95814                                |   |  |   |         | File No.: BA20250054684<br>Date Filed: 1/8/2025     |  |
|---|--|--------------|--|---|--|---|---------|---|--|
|   |  |              |  |   |  |   |         |   |  |
| Entity Details<br>Corporation Nam   | e  |              |  |   |  | som Physical The<br>oration   | erapy & | Wellness, Professional                              |  |
| Entity No.  |  |              |  |   |  | 6520396   |         |   |  |
| Formed In   |  |              |  |   |  | CALIFORNIA  |         |   |  |
| Street Address of Princ   | ipal Offi  | ice of Corpo | oration  |   |  |   |         |   |  |
| Principal Address   |  |              |  |   |  | 914 MISSION AVE, SUITE 1 FLOOR 2<br>SAN RAFAEL, CA 94901  |         |   |  |
| Mailing Address of Corporation<br>Mailing Address   |  |              |  |   | 914 MISSION AVE<br>SUITE 1 FLOOR 2<br>SAN RAFAEL, CA 94901 |   |         |   |  |
| Attention   |  |              |  |   |  |   |         |   |  |
| Street Address of California Office of Corporation<br>Street Address of California Office |  |              |  |   |  | 914 MISSION AVE, SUITE 1 FLOOR 2<br>SAN RAFAEL, CA 94901  |         |   |  |
| Officers  |  |              |  |   |  |   |         |   |  |
| Officer Name Officer Address  |  |              |  |   | Position(s)  |   |         |   |  |
| + Alicia Rober  | Alicia Roberts     8 CORTE VERANO     SAN RAFAEL, CA 94903 |              |  |   |  | Chief Executive Officer, Secretary, Chief Financial Officer                                       |         |   |  |
| Additional Officers   |  |              |  |   |  |   |         |   |  |
| Officer Name  |  |              | Officer Address                                |   |  | Position  |         | Stated Position                                     |  |
|   |  |              | -  | Ν | one Entere   | b   |         |   |  |
| Directors   |  |              |  |   |  |   |         |   |  |
| Directors Director Name   |  |              |  |   |  | Director Address  |         |   |  |
| + Alicia Roberts  |  |              |  |   |  | 8 CORTE VERANO<br>SAN RAFAEL, CA 94903  |         |   |  |
| The number of va  | acanci   | ies on Bo    | ard of Directors is: 0                         |   | <b>I</b>   |   |         |   |  |
| Agent for Service of Process<br>California Registered Corporate Agent (1505)              |  |              |  |   |  | UNITED STATES CORPORATION AGENTS, INC.<br>Registered Corporate 1505 Agent                         |         |   |  |
| Type of Business<br>Type of Business  |  |              |  |   | Phys   | Physical therapy  |         |   |  |
| Email Notifications<br>Opt-in Email Notifications   |  |              |  |   |  | No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail. |         |   |  |
|   | a cou  | rt of law,   | orporation has an out<br>for which no appeal t |   |  |   |         | Division of Labor Standards<br>of any wage order or |  |

| Electronic Signature   |            |  |  |  |  |  |  |  |
|--|------------|--|--|--|--|--|--|--|
| By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign. |            |  |  |  |  |  |  |  |
|  |            |  |  |  |  |  |  |  |
| Alicia Roberts   | 01/08/2025 |  |  |  |  |  |  |  |
| Signature  | Date       |  |  |  |  |  |  |  |
|  |            |  |  |  |  |  |  |  |