

C# 10556366

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
DIVISION OF MEDICAL QUALITY ASSURANCE

DATE	LICENSE NO.	CONTROL NO.
08/31/2021	PT 22092	164399

THE PHYSICAL THERAPIST

NAMED BELOW HAS MET ALL REQUIREMENTS OF  
THE LAWS AND RULES OF THE STATE OF FLORIDA.

Expiration Date: **NOVEMBER 30, 2023**

**KORY BROOKE THOMAS**



Handwritten signature of Ron DeSantis in black ink.

Ron DeSantis  
GOVERNOR

Handwritten signature of Scott A. Rivkees in black ink.

Scott A. Rivkees, MD  
State Surgeon General

DISPLAY IF REQUIRED BY LAW