

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000105430

FILED
Sep 14, 2011
Secretary of State

Entity Name: CLINICAL NEURODIAGNOSTICS LLC

Current Principal Place of Business:

1840 S.W. 22ND STREET
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2259
GRIFFIN, GA 30223

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: SHETH, ATEER
Address: 1840 S.W. 22ND STREET
City-St-Zip: MIAMI, FL 33145

Title: S
Name: SHETH, ATEER
Address: 1840 S.W. 22ND STREET
City-St-Zip: MIAMI, FL 33145

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ATEER SHETH

MR.

09/14/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date