

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000171335

Entity Name: CLINICALLY INTEGRATED NEURO NETWORK, LLC

Current Principal Place of Business:

2150 CORAL WAY
8TH FLOOR
MIAMI, FL 33145

Current Mailing Address:

2150 CORAL WAY
8TH FLOOR
MIAMI, FL 33145 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

O'DONNELL, NANETTE ESQ.
700 SW 8TH STREET
415
MIAMI, FL 33130 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: NANETTE O'DONNELL ESQ

01/26/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name NEUROSCIENCE CENTERS OF
FLORIDA FOUNDATION
Address 2150 CORAL WAY, 8TH FLOOR
City-State-Zip: MIAMI FL 33145

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: TAMARA ROBINETT

MGR

01/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date