#### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000506696

Entity Name: NEUROPLASTICITY ST. PETE LLC

**FILED** Apr 29, 2024 **Secretary of State** 4889532743CC

# **Current Principal Place of Business:**

2370 DR MARTIN LUTHER KING JR ST N SAINT PETERSBURG, FL 33704

## **Current Mailing Address:**

1866 MICHIGAN AVE NE ST PETERSBURG, FL 33703 US

FEI Number: 93-4345362 Certificate of Status Desired: No

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

SILVER, JOSHUA 1866 MICHIGAN AVE NE ST PETERSBURG, FL 33703 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 **AMBR** 

Name SILVER, JOSHUA

Address 1866 MICHIGAN AVE NE

City-State-Zip: ST PETERSBURG FL 33703

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: SILVER, JOSHUA

**AMBR** 

04/29/2024 Date