

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000001366

Entity Name: NEUROINTERNATIONAL HEALTHCARE, LLC

Current Principal Place of Business:

313 CONGRESS STREET
5TH FLOOR
BOSTON, MA 02210

Current Mailing Address:

313 CONGRESS STREET
5TH FLOOR
BOSTON, MA 02210 US

FEI Number: 46-4875017

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
1200 SOUTH PINE ISLAND ROAD
TALLAHASSEE, FL 32301 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: DONNA MOCH

02/06/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title SECRETARY
Name MARTIN, GINA
Address 313 CONGRESS STREET
5TH FLOOR
City-State-Zip: BOSTON MA 02210

Title MANAGER
Name WHEATLEY, T. ALAN
Address 313 CONGRESS STREET
5TH FLOOR
City-State-Zip: BOSTON MA 02210

Title MANAGER
Name MCGEE, MARIA
Address 313 CONGRESS STREET
5TH FLOOR
City-State-Zip: BOSTON MA 02210

Title MANAGER, CEO
Name KAUFMAN, PHILIP ROBERTS
Address 313 CONGRESS STREET
5TH FLOOR
City-State-Zip: BOSTON MA 02210

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: GINA L. MARTIN

SECRETARY

02/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date