

# 2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L13000097505

Entity Name: NEUROMICROSPINE PLLC

FILED  
Oct 20, 2014  
Secretary of State

## Current Principal Place of Business:

1040 GULF BREEZE PKWY.  
SUITE 205  
GULF BREEZE, FL 32561 US

## Current Mailing Address:

1040 GULF BREEZE PKWY.  
SUITE 205  
GULF BREEZE, FL 32561 US

## New Principal Place of Business:

1040 GULF BREEZE PKWY.  
SUITE 209  
GULF BREEZE, FL 32561 US

## New Mailing Address:

1040 GULF BREEZE PKWY.  
SUITE 209  
GULF BREEZE, FL 32561 US

FEI Number: 46-3156398

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS COURT  
SUITE A  
TAMPA, FL 33612 US

## Name and Address of New Registered Agent:

GIOVANINI, MARK A  
1040 GULF BREEZE PKWY  
SUITE 209  
GULF BREEZE, FL 32561 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: MARK A GIOVANINI

10/20/2014

Electronic Signature of Registered Agent

Date

## AUTHORIZED PERSONS:

Title: MGRM  
Name: GIOVANINI, MARK A  
Address: 1040 GULF BREEZE PKWY., SUITE 209  
City-St-Zip: GULF BREEZE, FL 32561 US

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: MARK A GIOVANINI

OWNE

10/20/2014

Electronic Signature of Authorized Person

Date