

121 0000 55462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

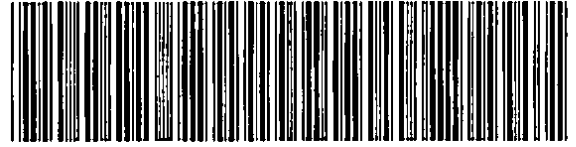
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500378887455

01/06/22--01011--023 **52.50

03/08/22--01011--013 **7.50

2022 APR 22 PM 4:22
SECRETARY OF THE
TREASURY

FILED

Statement
of Correction

MAY 10 2022

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Neurtuitive L.L.C.
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dr. John J. Renger, Ph.D.
Name of Person

Neurtuitive L.L.C.
Firm/Company

7342 NW 25th Terrace
Address

Boca Raton FL 33496
City/State and Zip Code

john.j.renger@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Renger
Name of Person

at (267)
Area Code

334-6835
Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

RECEIVED

2022 MAR 21 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FL

2022 APR 22 PM 4:22



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 APR 22 AM 8:05

SECRETARY OF STATE
TALLAHASSEE, FL

April 12, 2022

DR JOHN RINGER
7342 NW 25TH TERRACE
BOCA RATON, FL 33496

SUBJECT: NEURTUITIVE L.L.C.
Ref. Number: L21000055462

We have received your document for NEURTUITIVE L.L.C. and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Brumbley
Regulatory Specialist II

Letter Number: 522A00008484

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: Neurtuitive LLC.

SECOND: The Florida Document number of the limited liability company is: L 21000055462

THIRD: Document to be corrected is: Address of L.L.C. Form

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The incorrect statement of address of Neurtuitive LLC was
13682 Imperial Topaz Trail, Delray Beach FL. I have since
moved and the new address for Neurtuitive LLC is 7342 NW 25th
OR John Renger remains the registered agent. 3/16/2022 Boca Raton, FL 3349

☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR

☐ The electronic transmission of the record was defective.

John Renger 4/18/2022
Signature of Authorized Representative Date

Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Registered Agent's Signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)