

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000119392

Entity Name: NATIONAL PAIN RESEARCH INSTITUTE, LLC

Current Principal Place of Business:

5280 CORPORATE DRIVE
SUITE C-250
FREDERICK, MD 21703

Current Mailing Address:

5280 CORPORATE DRIVE
SUITE C-250
FREDERICK, MD 21703 US

FEI Number: 20-8133747

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: JOE DAVIS, ASST. SECRET.

03/28/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MEMBER
Name FLORIDA PAIN & REHABILITATION ASSOCIATES, INC.
Address 5280 CORPORATE DRIVE
SUITE C-250
City-State-Zip: FREDERICK MD 21703

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: FLORIDA PAIN & REHABILITATION ASSOCIATES INC.

MEMBER

03/28/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date