2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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Secretary of State
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Entity Name: NEUROHEALTH OF SOUTH FLORIDA LLC

Current Principal Place of Business:

951 NW 13TH STREET
5E
BOCA RATON, FL 33486

Current Mailing Address:

951 NW 13TH STREET
5E
BOCA RATON, FL 33486

FEI Number: 46-4598848

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEARLMAN, SCOTT M
951 NW 13 ST
5E
BOCA RATON, FL 33486 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	MGR	Title	MGR
Name	PEARLMAN, SCOTT	Name	ROSENZWEIG, TODD
Address	951 NW 13 ST	Address	951 NW 13 ST
City-State-Zip:	BOCA RATON FL 33486	City-State-Zip:	BOCA RATON FL 33486

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: SCOTT PEARLMAN MGR 03/08/2017

Electronic Signature of Signing Authorized Person(s) Detail — Date