

**2017 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L15000169072

**Entity Name:** ARUBAH NEUROSCIENCE INSTITUTE PLLC

**Current Principal Place of Business:**

1700 S 23RD STREET  
FORT PIERCE, FL 34950

**Current Mailing Address:**

214 GREEN BAY RD  
THIENSVILLE, WI 53092

**FEI Number:** 47-5228964

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

SHHADEH, AKRAM  
1700 S 23RD STREET  
FORT PIERCE, FL 34950 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:** AKRAM SHHADEH

03/07/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name SHHADEH, AKRAM  
Address 214 GREEN BAY RD  
City-State-Zip: THIENSVILLE WI 53092

Title AMBR  
Name GHEITH, AYMAN A  
Address 214 GREEN BAY RD  
City-State-Zip: THIENSVILLE WI 53092

Title AUTHORIZED MEMBER  
Name GUPTA, VIKAS  
Address 214 GREEN BAY RD  
City-State-Zip: THIENSVILLE WI 53092

*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:** AKRAM SHHADEH

REGISTERED AGENT

03/07/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date