

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000194050

Entity Name: NEURODEVELOPMENT THERAPY CENTER LLC

Current Principal Place of Business:

601 NW 82ND AVENUE
APT 407
PLANTATION, FL 33324

Current Mailing Address:

601 NW 82ND AVENUE
APT 407
PLANTATION, FL 33324 US

FEI Number: 99-2688011

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUGO, NEYDA
601 NW 82ND AVENUE
APT 407
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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name LUGO, NEYDA
Address 601 NW 82ND AVENUE APT 407
City-State-Zip: PLANTATION FL 33324

Title MGR
Name NUNEZ, JOSE
Address 601 NW 82ND AVENUE APT 407
City-State-Zip: PLANTATION FL 33324

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: NEYDA LUGO

MGR

02/13/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date