2017 FOREIGN LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Jan 26, 2017
Secretary of State
CR3684819204

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Entity Name: ACTIVE NEUROMONITORING, LLC

Current Principal Place of Business:

1451 W. CYPRESS CREEK RD, SUITE 300
FORT LAUDERDALE, FL 33309

Current Mailing Address:

1451 W. CYPRESS CREEK RD, SUITE 300
FORT LAUDERDALE, FL 33309

FEI Number: 46-5465956

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

EMAKPO, EMMANUEL
1451 W. CYPRESS CREEK RD, SUITE 300
FORT LAUDERDALE, FL 33309 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: EMMANUEL EMAKPO 01/26/2017

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MANAGING MEMBER	Title	MANAGING MEMBER
Name	FRIDAY, LATOYA	Name	EMAKPO, EMMANUEL
Address	1451 W. CYPRESS CREEK RD, SUITE 300	Address	1451 W. CYPRESS CREEK RD, SUITE 300
City-State-Zip:	FORT LAUDERDALE FL 33309	City-State-Zip:	FORT LAUDERDALE FL 33309

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: LATOYA FRIDAY MANAGING PARTNER 01/26/2017

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