

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000134822

**Entity Name:** NEUROTRONICS, LLC

**Current Principal Place of Business:**

13800 TECH CITY CIRCLE, SUITE 400  
ALACHUA, FL 32615

**Current Mailing Address:**

13800 TECH CITY CIRCLE, SUITE 400  
ALACHUA, FL 32615 US

**FEI Number:** 59-1410850

**Certificate of Status Desired:** No

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

JAKE, JOHNSON  
13800 TECH CITY CIRCLE, SUITE 400  
ALACHUA, FL 32615 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:** JAKE JOHNSON

04/24/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            JAKE, JOHNSON  
Address        13800 TECH CITY CIRCLE, SUITE 400  
City-State-Zip: ALACHUA FL 32615

Title            AMBR  
Name            NIHON KOHDEN NORTH AMERICA,  
                    INC.  
Address        1800 E WILSHIRE AVENUE  
City-State-Zip: SANTA ANA CA 92705

*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:** JAKE JOHNSON

PRESIDENT

04/24/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date