

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000037266

FILED  
May 01, 2011  
Secretary of State

**Entity Name:** AJP HEALTHCARE SERVICES LLC

**Current Principal Place of Business:**

6503 NW 66 WAY  
PARKLAND, FL 33067

**New Principal Place of Business:**

**Current Mailing Address:**

6503 NW 66 WAY  
PARKLAND, FL 33067

**New Mailing Address:**

FEI Number: 36-4630277

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PECUCH, ALEXSIS  
6503 NW 66 WAY  
PARKLAND, FL 33067 US

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

DESROCHERS, ALEXSIS  
6503 NW 66 WAY  
PARKLAND, FL 33067 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: ALEXSIS DESROCHERS

05/01/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DESROCHERS, ALEXSIS  
Address: 6503 NW 66 WAY  
City-St-Zip: PARKLAND, FL 33067

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ALEXSIS DESROCHERS

MGRM

05/01/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date