

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
May 18, 2011  
Secretary of State**

DOCUMENT# L09000100213

**Entity Name:** JACKSON HEALTH CONSULTING LLC

**Current Principal Place of Business:**

1717 N BAYSHORE DRIVE  
SUITE 215  
MIAMI, FL 33132

**New Principal Place of Business:**

**Current Mailing Address:**

1717 N BAYSHORE DRIVE  
SUITE 215  
MIAMI, FL 33132

**New Mailing Address:**

**FEI Number:** 27-1291563      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

JABBARI, JAMSHIP  
1717 NORTH BAYSHORE DRIVE  
SUITE 215  
MIAMI, FL 33132 US

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

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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** JABBARI, JAMSHIP  
**Address:** 1717 NORTH BAYSHORE DRIVE  
**City-St-Zip:** MIAMI, FL 33132

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: JAMSHIP JABBARI      MGR      05/18/2011

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