

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000112772

Entity Name: ORTHOFLEX MEDICAL LLC

FILED
Jan 30, 2011
Secretary of State

Current Principal Place of Business:

1436 NE 57 PLACE
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

1436 NE 57 PLACE
FORT LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 27-1389574

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEHASSI, OHAD
1436 NE 57 PLACE
FORT LAUDERDALE, FL 33334 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: JEHASSI, OHAD
Address: 1436 NE 57 PLACE
City-St-Zip: FORT LAUDERDALE, FL 33334 US

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: OHAD JEHASSI

MGR

01/30/2011

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