## 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000112772

**Entity Name: ORTHOFLEX MEDICAL LLC** 

**FILED** Mar 18, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1436 NE 57 PLACE 650 WEST AVENUE FORT LAUDERDALE, FL 33334

SUITE 603

MIAMI BEACH, FL 33139

**Current Mailing Address: New Mailing Address:** 

650 WEST AVENUE 1436 NE 57 PLACE FORT LAUDERDALE, FL 33334

SUITE 603

MIAMI BEACH, FL 33139

FEI Number: 27-1389574 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JEHASSI, OHAD JEHASSI, OHAD 650 WEST AVENUE 1436 NE 57 PLACE

FORT LAUDERDALE, FL 33334 US SUITE 603 MIAMI BEACH, FL 33139 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: 03/18/2012

> Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MANAGERS:**

JEHASSI, OHAD Name:

Address: 650 WEST AVENUE, SUITE 603 City-St-Zip: MIAMI BEACH, FL 33139 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 Statues.

SIGNATURE: OHAD JEHASSI **MGR** 03/18/2012