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: BRANT WILLIAM REAMER

Electronic Signature of Signing Authorized Person(s) Detail

### 2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT DOCUMENT# L08000027490

Entity Name: ARRIVA MEDICAL, LLC

# **Current Principal Place of Business:**

4252 NW 120TH AVENUE CORAL SPRINGS. FL 33065

## **Current Mailing Address:**

4252 NW 120TH AVENUE CORAL SPRINGS. FL 33065 US

#### FEI Number: 26-2193963

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

City-State-Zip: CORAL SPRINGS FL 33065

Certificate of Status Desired: No

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	
Authorized Person(s) Detail :					
Title	PRESIDENT	Title	VP		
Name	REAMER, BRANT WILLIAM	Name	ARAUJO FILHO, CLAUDIO GALENO	)	
Address	4252 NW 120TH AVENUE	Address	DE 4252 NW 120TH AVENUE		

City-State-Zip: CORAL SPRINGS FL 33065

PRESIDENT

11/06/2015

Date