

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000005301

Entity Name: NEXMED, LLC

Current Principal Place of Business:

75 AIR PARK DRIVE
RONKONKOMA, NY 11779

Current Mailing Address:

75 AIR PARK DRIVE
RONKONKOMA, NY 11779 US

FEI Number: 46-0488104

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PINZON, VICTORIA
3933 W. WHITEWATER AVE
WESTON, FL 33332 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: VICTORIA PINZON

01/09/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name TAVRISILL TRUST
Address 2721 EXECUTIVE PARK DRIVE, SUITE
4
City-State-Zip: WESTON FL 33331

Title MGR
Name GOLPHARM TRUST
Address 2721 EXECUTIVE PARK DRIVE, SUITE
4
City-State-Zip: WESTON FL 33331

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: GOLPHARM TRUST

MGR

01/09/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date