

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000001247

**Entity Name:** INTEGRATEMD, LLC

**Current Principal Place of Business:**

8060 COUNT MASSIE RD.  
NORTH LITTLE ROCK, AR 72113

**Current Mailing Address:**

P.O. BOX 3457  
LITTLE ROCK, AR 72203 US

**FEI Number:** 45-2878885

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title CFO  
Name BONNER, ELWOOD  
Address P.O. BOX 13267  
City-State-Zip: MAUMELLE AR 72113

*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:** ELWOOD BONNER

CFO

04/26/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date