

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000001599

FILED
Mar 23, 2009
Secretary of State

Entity Name: CVX, L.L.C.

Current Principal Place of Business:

350 NW 84TH AVENUE
SUITE 300
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

350 NW 84TH AVENUE
SUITE 300
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 65-1032539

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BREZING, RICHARD M.D.
350 NW 84TH AVENUE
300
PLANTATION, FL 33076 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 () Delete
Name: BREZING, RICHARD MD
Address: 350 NW 84TH AVENUE
City-St-Zip: PLANTATION, FL 33324

Title: MGR () Delete
Name: ROBERTS, HAROLD MD
Address: 350 NW 84TH AVENUE
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: RICHARD A. BREZING, M.D.

MGR

03/23/2009

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