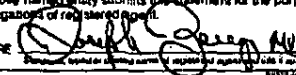
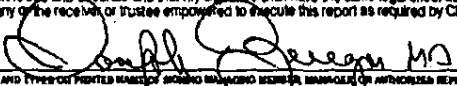


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L01000005181		
1. Entity Name VERO GASTROENTEROLOGY, LLC		
Principal Place of Business 777 37TH STREET SUITE B-402-104 VERO BEACH, FL 32960-4888		Mailing Address 777 37TH STREET SUITE B-402-104 VERO BEACH, FL 32960-4888
2. Principal Place of Business		3. Mailing Address
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State		City & State
Zip		Country
4. FEI Number 59-3715187		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent ZEREGA, JOSEPH M.D. 777 37TH STREET SUITE B-402-104 VERO BEACH, FL 32960-4888		7. Name and Address of New Registered Agent
Name		Street Address (P.O. Box Number is Not Acceptable)
City		FL Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE 		DATE 4/14/03
NOTE: Registered Agent's report must be submitted within 30 days of the change.		
FILE NOW!!! FEE IS \$50.00 Must be paid to the Department of State Due by May 15, 2003		
9. MANAGING MEMBERS/MANAGERS		
10. ADDITIONS/CHANGES		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.		
SIGNATURE: 		DATE 4/14/03 (772) 299-3511