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

FILED Mar 25, 2002 8:00 am Secretary of State 03-25-2002 90163 018 ****50.00

DOCUMENT # L 0100017497 1. Entity Name			03-25-2002 90163 018 ****50.00			
Respiratory Care	LLC					
DO NOT WRITE IN	I THIS SPAC	CE				
2. Principal Place of Business (1)	Mailing Address			B0	049333	
Suite, Apt #, etc.	<u>OYCYYStol</u> Suite, Apt. #, etc.)	Lakelde		DO NOT W	RITE IN THIS SPA	ACE
City & State Land, Fl	city & State	£1	4. FEI Nu	-3755	736	Applied For Not Applicable
33801 Country 3	380 L	LSA	5. Certific	ate of Status Desired		5.00 Additional e Required
		Name		d Address of Curre	- i	gent
DO NOT WRI	TE	Street Address (P.Q. Box Nu	mber is Not Accepta	Cher Dia Dia	
IN THIS SPAC	CE	1604	<u> </u>	TOI KU		
		City C. Y.		~!	FL	Zip Code
8. The above named entity submits this statement for the p	ourpose of changing its registe	ered office or register	ed agent, or	both, in the State of	Florida.	
SIGNATURE						
Signature, typed or printed name of registered agent and title	ή	S \$50.00			DATE	
·	Make Check Payable	e to Department o	f State	•		
	DOL 1	BY MAY 1				ļ
9. MANAGING MEMBERS/M	IANAGERS					
TITLE MERM IMGR	IANAGERS TI	TILE IAME				(12/01)
MERN IMER NAME VERNICE DUTTER	IANAGERS IT	TILE				(12/01)
MERM IMER NAME VERDICUDURINA	ANAGERS THE CALL OF STATE OF	TILE IAME STREET ADDRESS				R2E083B (12/01)
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