2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000027300

Entity Name: INSUMED, LLC.

FILED Jun 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2800 GLADES CIRC. 4733 NW 103 AVE SUITE E-103 SUNRISE, FL 33351 US WESTON, FL 33327 **New Mailing Address: Current Mailing Address:** 4733 NW 103 AVE 2800 GLADES CIRC. SUITE E-103 SUNRISE, FL 33351 US WESTON, FL 33327 FEI Number: 20-0112074 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ILEANA ARIAS TOVAR, ESQ 1725 MAIN STREET, SUITE 209 WESTON, FL 33326 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: ILEANA ARIAS TOVAR, ESQ. Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: MGR () Delete (X) Change () Addition MUJICA, ELIAS R MUJICA, ELIAS R Name: Name: 933 SAVANNAH FALLS DRIVE Address: 9988 NOB HILL PLACE Address: WESTON, FL 33327 City-St-Zip: City-St-Zip: SUNRISE, FL 33351 US Title: MGR () Delete Title: MGR (X) Change () Addition MUJICA, ELIDA Name: CANETE, MIGUEL Name: Address: 933 SAVANNAH FALLS DRIVE Address: 4733 NW 103 AVE City-St-Zip: WESTON, FL 33327 City-St-Zip: SUNRISE, FL 33351 US Title: () Delete Title: MGR () Change (X) Addition MUJICA, HECTOR Name: Name: 933 SAVANNAH FALLS DRIVE Address: Address: City-St-Zip: City-St-Zip: WESTON, FL 33327 US () Change (X) Addition Title: () Delete Title: MGR SOTO, LUIS Name: Name: Address: Address: 412 CAMERON DRIVE City-St-Zip: City-St-Zip: WESTON, FL 33326 US Title: () Delete Title: MGR () Change (X) Addition ARANGO, LAZARO Name: Name: 4733 NW 103 AVE Address: Address: City-St-Zip: City-St-Zip: SUNRISE, FL 33351 US Title: () Delete Title: () Change (X) Addition GIMENEZ. LOURDES Name: Name: Address: Address: 1391 SABAL TRAIL WESTON, FL 33327 US City-St-Zip: 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: ELIAS MUJICA MGR 06/09/2009