

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000027590

**FILED  
Jan 06, 2010  
Secretary of State**

**Entity Name:** E-MED FINANCE LLC

**Current Principal Place of Business:**

10 EDGEWATER DRIVE  
14F  
CORAL GABLES, FL 33133 US

**New Principal Place of Business:**

**Current Mailing Address:**

10 EDGEWATER DRIVE  
14F  
CORAL GABLES, FL 33133 US

**New Mailing Address:**

**FEI Number:** 74-3115557      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WEISZ, MICHEL O ESQ.  
200 S. BISCAYNE BLVD.  
1000  
MIAMI, FL 33131 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  
**Name:** GOULD, TAFFY  
**Address:** 10 EDGEWATER DRIVE, #14F  
**City-St-Zip:** CORAL GABLES, FL 33133 US

I hereby 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: TAFFY GOULD      MGR      01/06/2010

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