## 2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

## DOCUMENT# L03000029573

Entity Name: SPINE, L.L.C.

FILED Dec 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

600 HERITAGE DRIVE SUITE 110 JUPITER, FL 33458

Current Mailing Address: New Mailing Address:

600 HERITAGE DRIVE SUITE 110 JUPITER, FL 33458

FEI Number: 20-0154373 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

REED, MICHAEL L 600 HERITAGE DRIVE SUITE 110 JUPITER, FL 33458 US

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

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS: ADDI

Title: MGRM ( ) Delete Title: PCEO (X) Change ( ) Addition

 Name:
 MEDICAL CONCIERGE CONCEPTS, LLC
 Name:
 REED, MICHAEL L

 Address:
 600 HERITAGE DRIVE, STE 110
 Address:
 600 HERITAGE DRIVE

 City-St-Zip:
 JUPITER, FL 33458
 City-St-Zip:
 JUPITER, FL 33458

Title: PCEO (X) Delete Title: ( ) Change ( ) Addition

 Name:
 REED, MICHAEL L
 Name:

 Address:
 600 HERITAGE DRIVE, STE 110
 Address:

 City-St-Zip:
 JUPITER, FL 33458
 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: MICHAEL L REED PCEO 12/18/2009