

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000004009

FILED
Apr 18, 2009
Secretary of State

Entity Name: PROFESSIONAL PATHOLOGY SERVICES LLC

Current Principal Place of Business:

951 BROKEN SOUND PARKWAY SUITE #115
BOCA RATON, FL 33487 US

New Principal Place of Business:

902 CLINT MOORE RD
SUITE 222
BOCA RATON, FL 33487 US

Current Mailing Address:

951 BROKEN SOUND PARKWAY SUITE #115
BOCA RATON, FL 33487 US

New Mailing Address:

902 CLINT MOORE RD
SUITE 222
BOCA RATON, FL 33487 US

FEI Number: 90-0147265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATHOLOGY HOLDINGS, LLC
951 BROKEN SOUND PARKWAY SUITE #115
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

PATHOLOGY HOLDINGS, LLC
902 CLINT MOORE RD
SUITE 222
BOCA RATON, FL 33487 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: ANDREW QUEEN

04/18/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PATHOLOGY HOLDINGS, LLC
Address: 951 BROKEN SOUND PARKWAY SUITE #115
City-St-Zip: BOCA RATON, FL 33487 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PATHOLOGY HOLDINGS, LLC
Address: 902 CLINT MOORE RD STE 222
City-St-Zip: BOCA RATON, FL 33487 US

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: ANDREW QUEEN

MGR

04/18/2009

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