2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000006683

Entity Name: MANUEL IRIONDO M.D. L.L.C.

FILED Jul 26, 2008 Secretary of State

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

375 HARBOR DRIVE 3661 SOUTH MIAMI AVENUE

KEY BISCAYNE, FL 33149 506

MIAMI, FL 33133

Current Mailing Address: New Mailing Address:

375 HARBOR DRIVE 3661 SOUTH MIAMI AVENUE

KEY BISCAYNE, FL 33149 506

MIAMI, FL 33133

FEI Number: 20-0642603 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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:

IRIONDO, ANDRES J VIDAL, VICTOR J 375 HARBOR DRIVE 701 S.W. 27 AVENUE KEY BISCAYNE, FL 33149 US 606

MIAMI, FL 33135 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: VICTOR L. VIDAL 07/26/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name:IRIONDO, MANUELName:IRIONDO, MANUELAddress:375 HARBOR DRAddress:3661 SOUTH MIAMI AVENUE

City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: MIAMI, FL 33133

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: MANUEL IRIONDO, M.D. DR. 07/26/2008