

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000003778

Entity Name: ARUN AMATYA, MD, PLLC

FILED
May 06, 2009
Secretary of State

Current Principal Place of Business:

16440 S POST RD
SUITE 302
WESTON, FL 33331 US

New Principal Place of Business:

5207 CITRUS BLVD
#P315
RIVER RIDGE, LA 70123 US

Current Mailing Address:

16440 S POST RD
SUITE 302
WESTON, FL 33331 US

New Mailing Address:

5207 CITRUS BLVD
#P315
RIVER RIDGE, LA 70123 US

FEI Number: 20-2169408 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:

ARUN, AMATYA
16440 S POST RD
SUITE 302
WESTON, FL 33331 US

Name and Address of New Registered Agent:

JIM, CANIANO
4175 EAST BAY DR
SUITE 130
CLEARWATER, FL 33764 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: JIM CANIANO

05/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ARUN, AMATYA
Address: 16440 S POST RD #302
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ARUN, AMATYA
Address: 5207 CITRUS BLVD
City-St-Zip: RIVER RIDGE, LA 70123

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: ARUN AMATYA

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05/06/2009

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