2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# L06000046293

Entity Name: BLUE DOOR SURGICAL, LLC

Current Principal Place of Business:

325 S. BISCAYNE BOULEVARD
2915
MIAMI, FL 33131

New Principal Place of Business:

79 SW 12TH STREET
PH306
MIAMI, FL 33130

Current Mailing Address:

325 S. BISCAYNE BOULEVARD
2915
MIAMI, FL 33131

New Mailing Address:

79 SW 12TH STREET
PH306
MIAMI, FL 33130

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIMITED AGENT SERVICES
44 WEST FLAGLER STREET
675
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

LIMITED AGENT SERVICES
150 SE 2ND AVE
901
MIAMI, FL 33131 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: STEFANIE LEWIS 02/23/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: OKPAKU, ANIRE
Address: 325 S. BISCAYNE BOULEVARD, 2915
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: OKPAKU, ANIRE
Address: 79 SW 12 ST PH 306
City-St-Zip: MIAMI, FL 33130

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: STEFANIE LEWIS MGMR 02/23/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date