

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000046384

Entity Name: 800TESTMEDS.COM LLC

FILED
Nov 13, 2007
Secretary of State

Current Principal Place of Business:

6301 COLLINS AVENUE
#2403
MIAMI BEACH, FL 33141 US

Current Mailing Address:

6301 COLLINS AVENUE
#2403
MIAMI BEACH, FL 33141 US

New Principal Place of Business:

801 BRICKELL AVENUE
9TH FLOOR - 918 ANB
MIAMI, FL 33131 US

New Mailing Address:

801 BRICKELL AVENUE
9TH FLOOR - 918 ANB
MIAMI, FL 33131 US

FEI Number: 26-1399505 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:

LAVENDER, KYLE
873 WESTBAY DRIVE
105
LARGO, FL 33770 US

Name and Address of New Registered Agent:

MERKIN, STEWART A ESQ
444 BRICKELL AVENUE
STE. 300
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: STEWART A. MERKIN, ESQ.

11/13/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GOODMAN, FARRELL
Address: 6301 COLLINS AVENUE, #2403
City-St-Zip: MIAMI BEACH, FL 33141 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GOODMAN, FARRELL
Address: 801 BRICKELL AVE., 9TH FLR - 918ANB
City-St-Zip: MIAMI, FL 33141 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: FARRELL GOODMAN

MGRM

11/13/2007

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