## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000058351

Entity Name: MEDIMAX, LLC

FILED Sep 30, 2009 Secretary of State

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

3100 W. 84TH ST. BAY 3 3100 W. 84TH ST.

HIALEAH, FL 330184902 US BAY 3

HIALEAH, FL 330184902 US

Current Mailing Address: New Mailing Address:

3100 W. 84TH ST. BAY 3 3100 W. 84TH ST.

HIALEAH, FL 330184902 US BAY 3
HIALEAH, FL 330184902 US

FEI Number: 20-5002990 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: Name and Address of New Registered Agent:

PORTAL, ORTELIO
10945 W. OKEECHOBEE RD. # 201
PORTAL, ORTELIO
6845 NW 169 ST. UNIT D

HIALEAH, FL 33018 US 6845 NW 169 ST. UNIT D MIAMI LAKES, FL 33015 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: ORTELIO PORTAL 09/30/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 PORTAL, ORTELIO
 Name:
 PORTAL, ORTELIO

 Address:
 10945 W. OKEECHOBEE RD. # 201
 Address:
 6845 NW 169 ST. UNIT D

 City-St-Zip:
 HIALEAH, FL 33018 US
 City-St-Zip:
 MIAMI LAKES, FL 33015 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: ORTELIO PORTAL MGR. 09/30/2009