

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000074054

FILED
Mar 03, 2008
Secretary of State**Entity Name:** RXPART #3 LLC**Current Principal Place of Business:**4239 SUNBEAM RD SUITE 1
JACKSONVILLE, FL 32257**New Principal Place of Business:****Current Mailing Address:**4239 SUNBEAM RD SUITE 1
JACKSONVILLE, FL 32257**New Mailing Address:****FEI Number:** 20-5300994**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROBERTSON, ANDREW A
4239 SUNBEAM RD
SUITE 1
JACKSONVILLE, FL 32257 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGRM () Delete
Name: RXPART, INC.,
Address: 4239 SUNBEAM RD STE 1
City-St-Zip: JACKSONVILLE, FL 32257**Title:** P (X) Delete
Name: BIAS, ARLEN L
Address: 4239 SUNBEAM RD STE 1
City-St-Zip: JACKSONVILLE, FL 32257**Title:** CEO () Delete
Name: ROBERTSON, ANDREW A
Address: 4239 SUNBEAM RD. SUITE 1
City-St-Zip: JACKSONVILLE, FL 32257**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: ANDREW ROBERTSON

CEO

03/03/2008

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