

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000100606

Entity Name: NERDHEALTH, LLC

FILED  
Apr 22, 2008  
Secretary of State

**Current Principal Place of Business:**

2845 AVENTURA BLVD., STE. 250  
AVENTURA, FL 33180

**New Principal Place of Business:**

1245 SOUTH POWERLINE ROAD  
SUITE 300  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

2845 AVENTURA BLVD., STE. 250  
AVENTURA, FL 33180

**New Mailing Address:**

1245 SOUTH POWERLINE ROAD  
SUITE 300  
POMPANO BEACH, FL 33069

FEI Number: 20-5920173

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

COHN, ALAN B  
100 WEST CYPRESS CREEK ROAD  
TRADE CENTRE SOUTH, SUITE 700  
FT. LAUDERDALE, FL 33309 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: MGR ( ) Delete  
Name: KESSELMAN, MARC M  
Address: 2845 AVENTURA BLVD., STE. 250  
City-St-Zip: AVENTURA, FL 33180

Title: MGR ( ) Delete  
Name: KESSELMAN, ROBIN  
Address: 2845 AVENTURA BLVD., STE. 250  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: KESSELMAN, MARC M  
Address: 1245 SOUTH POWERLINE ROAD, SUITE 300  
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGR (X) Change ( ) Addition  
Name: KESSELMAN, ROBIN  
Address: 1245 SOUTH POWERLINE ROAD, SUITE 300  
City-St-Zip: POMPANO BEACH, FL 33069

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: ROBIN KESSELMAN

MGR

04/22/2008

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