2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000028523

Entity Name: ASSURED RX LLC

FILED Apr 13, 2009 Secretary of State

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

2974 CYPRESS LAKES CT 14450 46TH ST. N. TARPON SPRINGS, FL 34688 US SUITE 115

SUITE 115 CLEARWATER, FL 33762

Current Mailing Address: New Mailing Address:

2974 CYPRESS LAKES CT 14450 46TH ST. N.

TARPON SPRINGS, FL 34688 US SUITE 115

CLEARWATER, FL 33762

FEI Number: 26-2234498 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PATEL, ANIL

1726 SW 27TH ST

OCALA, FL 34471 US

OCALA, FL 34471 US

OLARGO, FL 33771 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: PATRICK O'CONNOR 04/13/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name: PATEL, NITESH Name: PATEL, NITESH Address: 2979 CYPRESS LAKES CT Address: 14450 46TH ST. N.

City-St-Zip: TARPON SPRINGS, FL 34688 US City-St-Zip: CLEARWATER, FL 33762 US

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

 Name:
 PATEL, PRADIP C
 Name:

 Address:
 8902 N DALE MABRY HWY, SUITE 114
 Address:

 City-St-Zip:
 TAMPA, FL 33614 US
 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: NITESH PATEL MGR 04/13/2009