

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000053005

**FILED
Jan 04, 2012
Secretary of State**

Entity Name: ADELAMED, LLC

Current Principal Place of Business:

925 NE 30 TERRACE, STE 202
HOMESTEAD, FL 33033

New Principal Place of Business:

Current Mailing Address:

20043 SW 103RD AVE
CUTLER BAY, FL 33189

New Mailing Address:

FEI Number: 26-2773479 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

VAZQUEZ, NIVIA E M.D.
925 NE 30 TERRACE, STE 202
HOMESTEAD, FL 33033 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
Name: VAZQUEZ, NIVIA E M.D.
Address: 925 NE 30 TERRACE, STE 202
City-St-Zip: HOMESTEAD, FL 33033

I hereby 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: NIVIA E. VAZQUEZ, M.D. RA 01/04/2012

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