

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000067600

**FILED  
Feb 09, 2010  
Secretary of State**

**Entity Name:** RAFAEL J. MOLINA, M.D., L.L.C.

**Current Principal Place of Business:**

2475 BRICKELL AVENUE #1107  
MIAMI, FL 33129

**New Principal Place of Business:**

**Current Mailing Address:**

2475 BRICKELL AVENUE #1107  
MIAMI, FL 33129

**New Mailing Address:**

**FEI Number:** 26-3012092      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MOLINA, RAFAEL J M.D.  
2475 BRICKELL AVENUE #1107  
MIAMI, FL 33129 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:** MOLINA, RAFAEL J M.D.  
**Address:** 2475 BRICKELL AVENUE #1107  
**City-St-Zip:** MIAMI, FL 33129

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: RAFAEL J. MOLINA, MD      MGRM      02/09/2010

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