2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 30, 2012
Secretary of State

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Entity Name: ARLEY THERAPY SERVICES, LLC

Current Principal Place of Business:

33 N. KROME AVE.
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

33 N. KROME AVE.
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 80-0294260 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORREA, JOSE N
833 SAVANNAH FALLS DR.
WESTON, FL 33327 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: VALLEJO, BLANCA R
Address: 33 N. KROME AVE.
City-St-Zip: HOMESTEAD, FL 33030

Title: MGRM
Name: VALLEJO, JOSE A
Address: 33 N. KROME AVE.
City-St-Zip: HOMESTEAD, FL 33030

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 Statues.

SIGNATURE: BLANCA VALLEJO P 03/30/2012

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