

2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000027448

FILED
Oct 06, 2010
Secretary of State

Entity Name: VASCULAR DEVICE PARTNERS LLC

Current Principal Place of Business:

1501 SOUTH MIAMI AVENUE
MIAMI, FL 33129

New Principal Place of Business:

Current Mailing Address:

1501 SOUTH MIAMI AVENUE
MIAMI, FL 33129

New Mailing Address:

FEI Number: 26-4505702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

JOSE I ALMEIDA MD
1501 SOUTH MIAMI AVENUE
MIAMI, FL 33129 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: JOSE I ALMEIDA MD

10/06/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: ALMEIDA, JOSE I MD
Address: 1501 SOUTH MIAMI AVENUE
City-St-Zip: MIAMI, FL 33129

Title: S
Name: ALMEIDA, JOSE I MD
Address: 1501 SOUTH MIAMI AVENUE
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: JOSE I ALMEIDA MD

MGR

10/06/2010

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