

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000036903

Entity Name: MDLIVEVISIT, LLC

FILED
Sep 17, 2010
Secretary of State

Current Principal Place of Business:

18999 BISCAYNE BOULEVARD
SUITE 201
AVENTURA, FL 33180

New Principal Place of Business:

13650 NW 8 STREET
SUITE 103
SUNRISE, FL 33325

Current Mailing Address:

18999 BISCAYNE BOULEVARD
SUITE 201
AVENTURA, FL 33180

New Mailing Address:

13650 NW 8 STREET
SUITE 103
SUNRISE, FL 33325

FEI Number: 27-1914607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDERMOTT WILL & EMERY, LLP
201 SOUTH BISCAYNE BOULEVARD
SUITE 2200
MIAMI, FL 33131 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: MDLIVECARE HEALTH SERVICES, INC.
Address: 13650 NW 8 STREET, SUITE 103
City-St-Zip: SUNRISE, FL 33325

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: RANDY PARKER

MGR

09/17/2010

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