

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000075603

**FILED  
Apr 12, 2011  
Secretary of State**

**Entity Name:** WAL MED, LLC

**Current Principal Place of Business:**

800 BRICKELL AVENUE, SUITE 1111  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

800 BRICKELL AVENUE, SUITE 1111  
MIAMI, FL 33131

**New Mailing Address:**

**FEI Number:** 27-0673166      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SCHOTTENSTEIN, JEFFREY  
800 BRICKELL AVENUE, SUITE 1111  
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:** SCHOTTENSTEIN, JEFFREY  
**Address:** 800 BRICKELL AVENUE, SUITE 1111  
**City-St-Zip:** MIAMI, FL 33131

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: JEFF SCHOTTENSTEIN      MGRM      04/12/2011

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