

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000009056

FILED
Jan 23, 2012
Secretary of State

Entity Name: EQUINE INTERNAL MEDICINE CONSULTING, PLLC

Current Principal Place of Business:

14771 SW 26 ST
DAVIE, FL 33325 US

New Principal Place of Business:

Current Mailing Address:

14771 SW 26 ST
DAVIE, FL 33325 US

New Mailing Address:

FEI Number: 27-1848032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARRILLO, NATALIE
14771 SW 26TH STREET
DAVIE, FL 33325 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: CARRILLO, NATALIE A
Address: 14771 SW 26ST
City-St-Zip: DAVIE, FL 33325 US

Title: MGRM
Name: DIKLIC, ANTE D
Address: 14771 SW 26ST
City-St-Zip: DAVIE, FL 33325 US

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: NATALIE CARRILLO

MGRM

01/23/2012

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