

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000099372

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** EMD HOLDINGS, LLC

**Current Principal Place of Business:**

1802 N. UNIVERISTY DR., #102-334  
PLANTATION, FL 33322

**New Principal Place of Business:**

4292 S UNIVERSITY DR  
DAVIE, FL 33328

**Current Mailing Address:**

1802 N UNIVERSITY DRIVE  
# 102-334  
PLANTATION, FL 33322

**New Mailing Address:**

4292 S UNIVERSITY DR  
DAVIE, FL 33328

**FEI Number:** 27-3518574

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAMBER, EMILY  
1802 N. UNIVERISTY DR., #102-334  
PLANTATION, FL 33322 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:** GAMBER, EMILY  
**Address:** 1802 N. UNIVERISTY DR., #102-334  
**City-St-Zip:** PLANTATION, FL 33322

**Title:** MGRM  
**Name:** VALLEE, DAN  
**Address:** 4929 S UNIVERSITY DR  
**City-St-Zip:** DAVIE, FL 33328

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:** EMILY GAMBER

**PRES**

**04/27/2012**

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