

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000105357

**FILED**  
**Feb 01, 2012**  
**Secretary of State**

**Entity Name:** SLIM MED NO. 3, LLC

**Current Principal Place of Business:**

19342 S.W. 68TH STREET  
PEMBROKE PINES, FL 33332 US

**New Principal Place of Business:**

**Current Mailing Address:**

19342 S.W. 68TH STREET  
PEMBROKE PINES, FL 33332 US

**New Mailing Address:**

**FEI Number:** 27-3769334

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SLIM MED HOLDINGS, INC.  
19342 S.W. 68TH STREET  
PEMBROKE PINES, FL 33332 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:** SLIM MED HOLDINGS, INC.  
**Address:** 19342 S.W. 68TH STREET  
**City-St-Zip:** PEMBROKE PINES, FL 33332 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:** JOSEPH K. ADKINS JR.

MGMR

02/01/2012

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