

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000125081

FILED
Nov 23, 2011
Secretary of State

Entity Name: COSOCO MEDICAL SUPPLY L.L.C.

Current Principal Place of Business:

16640 SOUTH POST ROAD
APT 103
WESTON, FL 33331

New Principal Place of Business:

16640 SOUTH POST ROAD
SUITE 103
WESTON, FL 33331

Current Mailing Address:

16640 SOUTH POST ROAD
APT 103
WESTON, FL 33331

New Mailing Address:

16640 SOUTH POST ROAD
SUITE 103
WESTON, FL 33331

FEI Number: 27-4182920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLORZANO, ALEJANDRO
16640 SOUTH POST ROAD
SUITE 103
WESTON, FL 33331 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: ALEJANDRO SOLORZANO

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SOLORZANO, ALEJANDRO
Address: 16640 SOUTH POST ROAD SUITE 103
City-St-Zip: WESTON, FL 33331

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: ALEJANDRO SOLORZANO

MGRM

11/23/2011

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