

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000130245

FILED
Apr 04, 2011
Secretary of State

Entity Name: INJURY MED EXPRESS LLC

Current Principal Place of Business:

2901 SW 149 AVENUE
SUITE 400
MIRAMAR, FL 33027 FL

New Principal Place of Business:

Current Mailing Address:

2901 SW 149 AVENUE
SUITE 400
MIRAMAR, FL 33027 US

New Mailing Address:

FEI Number: 27-4344784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MATZA, ROCHELLE S
2901 SW 149 AVENUE
SUITE 400
MIRAMAR, FL 33027 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: MGR
Name: AUTOMATED HEALTHCARE SOLUTIONS LLC
Address: 2901 SW 149 AVENUE, SUITE 400
City-St-Zip: MIRAMAR, FL 33027 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: ROCHELLE S. MATZA

VP

04/04/2011

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